

The Veterans Overmedication Prevention Act, introduced by the Chairman of the Armed Services Committee, Senator John McCain (R-AZ), would commission an independent review of the deaths of veterans who died by suicide or drug overdose over the last five years while receiving care through the Department of Veterans Affairs (VA) and an assessment of the role that prescription medications may have played.

Donnelly said, "As our nation combats two terrible crises, the opioid abuse epidemic and the unacceptably-high rate of veteran suicide, we owe it to those who have served to better understand any correlation between overmedication and suicide. This bipartisan bill would bring independent experts together so that we have the information necessary to ensure veterans receive the best possible care and help determine whether overmedication of prescription drugs, including opioids, is contributing to veteran suicide."

Donnelly has worked effectively and tirelessly over the past four-plus years to find commonsense, bipartisan solutions to combat military suicide and strengthen military mental health care, including through his Sexton Act and his Servicemember Mental Health Care Package. Donnelly has also helped pass legislation enabling veterans to access care outside the VA and has pushed for increased transparency and accountability at VA hospitals.

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2.6 - Tampa Bay Reporter: [Bilirakis Seeks To Expand Dental Care For Veterans](#) (12 November, 17k online visitors/mo; Tampa, FL)

WASHINGTON, DC – U.S. Rep. Gus Bilirakis, R-Tarpon Springs, is sponsoring a bill that's designed to expand access to dental care for veterans.

The bill, called the Veterans Early Treatment for Chronic Ailment Resurgence through Examinations Act, arose because of conversations Bilirakis had with veterans while co-hosting the Stars, Stripes and Smiles event each year, to provide dental care to 75 veterans at no cost.

"Each year when I co-host the Stars, Stripes and Smiles event, I am heartbroken to hear the stories of veterans suffering with conditions that are exacerbated by poor oral health," Bilirakis said. "Many of them are in pain and cannot afford treatment. We know that preventive care leads to better health outcomes and to long-term savings. My hope is that the VET CARE bill will serve as a catalyst for expanding dental health care services to all veterans, while saving the Veterans Administration money due to fewer complications of chronic ailments," Bilirakis said.

The VET CARE bill will authorize a pilot program to provide veterans with dental care and evaluating the cost savings of improving oral health as an integral part of total body health.

The pilot program involves 1,500 veterans between the ages of 40 and 70 years old, who have Type II Diabetes and untreated periodontal disease. The outcomes of the pilot program would be reported to Congress providing data to help make effective health policy decisions for the VA and its patients.

If the pilot program demonstrates that investing in professional oral health care makes patients healthier overall while saving taxpayers money, Bilirakis said he would pursue legislation to

responsibly deliver dental care to veterans who have earned and deserve the best health care they can receive.

Bilirakis represents Florida's 12th Congressional District, which includes north Pinellas and Pasco counties.

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3. Modernize Our System

4. Focus Resources More Efficiently

4.1 - The Register-Herald: [Raleigh County Veterans Court helps vets get their lives back on track](#) (12 November, Wendy Holdren. 77k online visitors/mo; Beckley, WV)

In an office outside Judge Andrew Dimlich's chambers on the bottom floor of the Raleigh County Judicial Annex, nine men and women in professional attire sit at a boardroom table.

At the center of the table, among their legal pads and coffee cups, is a landline telephone dialed into the Martinsburg VA Medical Center.

With the call on speakerphone, Judge Dimlich asks, "How have you been?" A veteran on the other line responds, "I've been doing great."

He shares an update about his health and some exciting news about an invitation to a speaking event.

The judge offers congratulations, and asks if there are any issues or problems he or other members at the table need to address.

The man says no, and the judge adds, "All right, well, you keep up the good work."

Another veteran, this one much more soft spoken than the last, picks up the line. He, too, shares an update with the team.

A woman at the left side of the boardroom table smiles broadly and says to the man, "You're doing everything we're asking of you. We're really proud of you."

These men, along with two others, are the first participants of the Raleigh County Veterans Court — a specialty court offering veterans who have committed a nonviolent crime in Raleigh County a chance to get their lives back on track.

To qualify for the program, their crime must in some way be attributable to their military service.

Judge Dimlich said the issue does not have to be combat-related for a veteran to be approved. For example, one veteran in the program was tasked with delivering the news to families that their loved one had died.

"You can look at a guy's service and what he's been through," said Brandon Steele, Raleigh County assistant prosecuting attorney. "We have to ask ourselves, 'Is this person ready to face the problem head on? Or are they looking for a free pass?' "

Dimlich emphasizes that Veterans Court is not a free pass: "It takes a lot more time getting through the process than just dealing with criminal charges."

Raleigh County Magistrate Steve Massie said the U.S. wouldn't be the country it is today without the service of veterans.

"If we can attribute their problems to what they did for us, we owe them the opportunity for this."

Getting started

When someone is arrested, one of the first questions a defense attorney will ask is, "Are you a veteran?"

If the answer is yes, and the individual was honorably discharged, that person may be a candidate for Veterans Court.

Their service will be confirmed by the VA, and the Veterans Court team will assemble, every other Thursday at 3 p.m., to review the standing of current participants and consider new applicants.

Applicants are asked, "How did you get from honorably discharged to here? Tell us what's going on in your life."

If veterans are accepted into the program, their criminal charges are placed on hold while the court helps them address underlying issues — everything from housing and employment to substance abuse and PTSD treatment.

Steele said the program varies in duration based on the needs of the individual. If veterans successfully complete the program, charges can be completely dismissed or dropped to a misdemeanor, at the discretion of the prosecutor. If they do not complete the program, they go back to square one, with charges still pending.

"I've found these veterans are not just receptive to the program because of the reduced charges," Steele said. "They don't want to be the person they've become and they're asking for help."

He said the program's administrators want to help the veterans meet their personal, career and family goals.

The first Veterans Court in the U.S. was established in 2008 in Buffalo, N.Y. Since then, programs have followed suit across the country.

Aside from Raleigh County, three other programs are available in West Virginia — in Putnam, Wayne and Kanawha counties. Mercer County is in the early stages of creating a program.

Most of the Raleigh County cases have involved drug use, Steele said, which requires long-term rehabilitation.

Although the Beckley VA Medical Center does not offer long-term rehabilitation for substance use, facilities in Martinsburg and Salem, Va., do.

Steele said some veterans simply do not know what services are available to them through the VA. But Veterans Court works with participants to match them with the appropriate tools and resources.

Coordinating benefits

Jackie Hartsog, Veterans Justice Outreach coordinator, is the Veterans Court go-to for all things benefits-related.

First, she helps determine whether applicants qualify for VA health care benefits. If they do, she shares with them what services are available and makes recommendations based on her initial assessment.

The VA has a tremendous number of services, she said, including residential and out-patient mental health services. Some diagnoses treated include PTSD, traumatic brain injuries and substance use disorder.

Oftentimes, mental health issues will manifest themselves through the commission of crimes or illegal activities, Hartsog said.

She also said mental health is sometimes associated with homelessness. She and a team at the VA help connect veterans who qualify with the U.S. Department of Housing and Urban Development's VA Supportive Housing voucher program.

If approved, the veterans not only get a housing voucher, but also a case manager who works with them in all aspects of their care.

"They make sure they're making all their appointments, getting their medications and the utilities are staying on."

Hartsog said once mental health and housing are addressed, employment is needed to help veterans support themselves.

The VA offers employment specialists to help veterans locate jobs. Supported employment and compensated work therapy programs are also available.

Through supported employment, an advocate for the veteran goes to his or her job site and works with the employer to discuss the veteran's limitations, and to ensure the work schedule isn't overwhelming.

Through the transitional work therapy program, veterans are hired for jobs within the VA with the goal of moving into stable employment. This program is especially conducive for the scheduling of other needed appointments at the facility.

"What's so great about my job is having all of these resources I can connect people with," Hartsog said. "Every piece of the puzzle can come together for them."

Even if a veteran isn't accepted into Veterans Court, the services at the VA are still available to them, Hartsog noted.

"I'm going to be working with them, either way."

Accountability

Veterans Court team members say the program is intense.

"Only the people who truly desire to change their lives are going to be successful in it," Steele said.

Every two weeks, the participants have to answer to the court for everything they've been doing — getting treatment for substance use disorder, taking care of their families, managing their therapy, going to work, checking in at Day Report and more.

"They get a touch from the state, the VA or a mentor every day," Steele said. "We talk to them on a daily basis, sometimes multiple times per day."

Currently, the program welcomes veterans to volunteer as mentors for the program, but as the program progresses, graduates will be asked to become mentors.

Hartsog said working with veterans, she hears a lot about the camaraderie veterans share and the support they receive from one another.

"They can't get that same connection with their loved ones, but in Veterans Court, they're together and able to support each other."

Magistrate Massie, too, said the transition from military life to civilian life can be difficult. So when they get a piece of that brotherhood back, they appreciate it.

Steele agreed that's sometimes the missing link — "They need to know somebody is there to help me out, that I'm not alone."

All Veterans Court team members are volunteers — the judge, defense attorneys, prosecutors, mentors and others — and many of them are veterans themselves.

"It's veterans taking care of veterans," Massie said. "This is us guys taking care of our men. And those who aren't veterans, they're patriots."

Love of country

Raleigh County Veterans Court participants are also part of a special demographic, as West Virginia has the highest number of veterans per capita in the nation.

"We're a very patriotic people," Steele said. "We believe in America and in serving our country."

He continued, "At some point in this participant's life, for nothing in return, they have been willing to give up their life for their country. That's a special moment for a guy, when he has said, 'My country is greater than me.' That takes a lot of courage."

Implementing Veterans Court was one of the first tasks Judge Dimlich set off to accomplish when he took office Jan. 1, 2017.

"They fought for our country. They fought for our freedoms," Dimlich said. "It's not a break. They deserve our help. It's an easy call."

For more information about Veterans Court, call 304-252-2417.

Massie also invites veterans to Bible Baptist Church, at 2071 Robert C. Byrd Drive in Beckley, at 7 p.m. Wednesdays for a program called Discipled Veterans. He said veterans of all ages gather to talk about transitioning into civilian life and more.

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4.2 - Flyer Group: [Cascade students honor veterans](#) (12 November, Abigail Church, 46k online visitors/mo; Avon, IN)

Cascade High School's AP Government class recently visited the Richard Roudebush V.A. Medical Center in Indianapolis to deliver more than 1,300 basic supplies and toiletries donated to U.S. veterans.

Each year CHS has a Veterans' Day program honoring veterans, but also hosts a school-wide project to give back to the veterans in the community.

This year, the AP Government class decided to collect items that the Veterans Hospital was in need of for their patients. Some of the items collected include toothbrushes, toothpaste, deodorant, lip balm, shaving cream, dental floss, shampoo and conditioner. The schools and the entire community came together in gathering supplies.

"It is important to give back to veterans and honor and support them for the sacrifices they made and continue to make for our country," Cascade AP Government teacher Joshua Hagenow said.

Veterans' hospitals and clinics all across the country see nearly six million patients each year. There are more than 150 veterans' hospitals and more than 800 VA community-based outpatient clinics that promote, preserve and restore health.

On the visit to the VA, the class got the opportunity to interview veterans at the hospital and talk to them about their time in the service. They also got to tour the prosthetics lab, learn about stem cell research at the hospital and visit the simulation lab where they met a simulation mannequin named Rudy.

The collection for the veterans is a continuation of Hagenow's AP Government students' commitment to recognizing servicemen and women. Last year, the class put together a presentation of new flags in front of the Cadet Center at the school. The display recognizes all branches of military service.

Abigail Church is a CHS senior and editor-in-chief of student publications.

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5. Improve Timeliness of Service

5.1 - WCMH (NBC-4, Video): [Sprayed and betrayed: Veterans exposed to Agent Orange feel abandoned by VA](#) (12 November, 1.1M online visitors/mo; Columbus, OH)

PINELLAS COUNTY, FL (WFLA) – Veterans descended on Bay Pines VA Medical Center in Florida Thursday to protest what they’re calling discrimination.

“Our country sent us to war and we expected them to take care of us, and they won’t do it,” said Blue Water Navy Vietnam Veteran Mike Kvintus.

Kvintus rallied in front of the VA with fellow Blue Water Navy Vietnam Veterans, sailors who served in Vietnam’s territorial waters, as well as personnel who served on Guam and in Thailand. All of these vets say they’ve been unfairly excluded from Agent Orange benefits and coverage.

“We’re being discriminated against,” explained Marine veteran Brian Moyer, who served on Guam. “Agent Orange does not discriminate, the government does, it’s that simple.”

The VA stripped Agent Orange benefits from Moyer and other military personnel who were not boots on the ground in Vietnam. Those who served in Vietnam and developed certain diseases are presumed to have been exposed to Agent Orange and are therefore eligible for medical coverage and disability benefits.

Navy deck logs obtained by WFLA show Mike Kvintus was on the destroyer in Da Nang harbor watching as the military sprayed Agent Orange from above. He suffers from conditions tied to Agent Orange exposure, but he was denied benefits. The VA says his illnesses are not tied to exposure.

Through his efforts and the efforts of others, 319 members of the U.S. House of Representatives backed a bill restoring benefits to Blue Water Navy Veterans, but the bill failed to get out of committee last week.

“They can stand up and say they co-sponsored, but when we ask them for the money to fund our bill they turn their backs on us and they tells us we don’t have any funds for you,” said Kvintus.

“That tells us we are nothing more than garbage in the eyes of the government,” added Moyer.

According to testimony in Congress, we are losing an average of 523 Vietnam Veterans each day.

Veterans hope President Trump will break this impasse and sign an executive order restoring their benefits.

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5.2 - Standard-Examiner: [Veterans' Hospital takes wellness approach to combat veteran health problems](#) (12 November, Elizabeth Quinn, 803k online visitors/mo; Ogden, UT)

Opioid addiction, heart disease and post-traumatic stress disorder are some of the most common health issues among veterans, and Truman Veterans' Hospital is increasingly finding that the path to recovery for veterans is through wellness.

The veterans hospital has been doing wellness for five years. But last year, it brought together the pieces, formalized its efforts and named it the Integrative Health and Wellness Program.

The focus is on veterans' health as a whole. This year, the veterans hospital brought on three new health coaches as part of the program for a grand total of four full-time staff — soon to be five.

"Our biggest challenge is changing a 100-year-old system," said Jeremy Jobe, one of the new health coaches at the veterans hospital.

That system's central focus has long been prescribing medications. But that doesn't take in the big picture — the mental, physical and spiritual health of the veteran.

"The pharmaceutical route only takes care of 20 percent of the problem," Jobe said. The other 80 percent of getting healthy is up to the person.

"You're your best advocate... medication... everything," he said.

It's not just about educating veterans about "whole health," Jobe said. It's also an opportunity for physicians to see the benefits of wellness. In the end, what the health coaches hope the program looks like is this: A veteran goes to see a physician who refers him or her to the program. The veteran goes to coaching sessions and then returns to the physician with a personalized health plan.

The plan gives the physician a sense of the veteran's health priorities when creating a plan of care. Together, coaches and physicians can change the outcome for veterans by sharing the responsibility for the patient's outcome, Jobe said.

Opioids, be gone

That same veteran-centered approach is in use in the Integrative Health and Wellness Program (formerly the Whole Health Program) said April Leverett, manager of the program. She describes herself as a longtime advocate of non-traditional approaches to veterans' health.

Asking questions like, "What really matters to you in your life?" "What brings you a sense of joy and happiness?" "What is your vision of your best possible health?" effectively shifts the focus to the veteran, she said.

"We empower and equip veterans to live the life that they want to live," Leverett said, "not the one we think they are supposed to live."

Between 2010 and 2015, opioid addiction rose 55 percent among veterans. They're also twice as likely as non-veterans to accidentally overdose, according to a report from the Center for Ethics and the Rule of Law.

Leverett said she thinks the program is one of many initiatives that have impacted reduction in opioid use.

Veterans can participate in Integrative Health and Wellness Coaching. This approach involves face-to-face or over-the-phone consultations with coaches, and the hospital plans to add a virtual option sometime soon. It uses mindfulness to treat mental or physical problems, including addiction, by pushing veterans to be mindful of their purpose and life aspirations when making choices.

Veterans rate themselves on where they think they are in each of the areas and choose which area or plan they want to start with.

"Tell me what matters to you," is the prompt that changes the conversation with veterans from advising to listening, said Jobe, who is a veteran himself. It focuses on what the veteran thinks he or she needs, not what anyone else thinks the person needs.

The plans can include making dietary changes and taking classes like tai chi, yoga and guided meditation that are offered under the Integrative Medicine program, a branch of the Integrative Health and Wellness program.

"It's their choice," coach Jessica Streit said.

Jobe said: "Your agenda is our agenda."

Into action

Elton Larry "Dan" Lamberson, 63, who served five and a half years in the military, was one of Jobe's patients in the Integrative Health and Wellness program. He started having trouble with his health and began falling.

When he began physical therapy, his therapist asked if he would be interested in the program. Soon after, Lamberson began meeting with Jobe to devise a plan.

Going into the program, Lamberson did not have a goal in mind. All he knew was that he needed help and answers.

"They let me make most of my own choices," Lamberson said. "They let me ask the questions, and they give me the answers."

Lamberson said the program is non-judgmental and he has enjoyed it.

While going through the eight stages of health, he saw how each was connected. By focusing on mindfulness, Lamberson has learned how to be mindful while eating. For example, Lamberson and others in the program practice consciously eating by placing a piece of food in their mouth, letting it sit there without chewing, feeling the texture, tasting it and noticing if it melts.

He has also learned how to be mindful of the present moment. He talks about a cartoon titled “Mind Full, or Mindful?” that illustrates how to be present. In it, a human figure is walking a dog. A “thought bubble” shows the person thinking about everything except the immediate environment. Meanwhile, the dog is only focusing on what lies ahead, physically.

“I don’t think you need to have an emotional problem at all to go through (the program) and gain something,” Lamberson said. “Most of the people coming here have a medical problem, but not all of them have an emotional problem.”

He has become a big booster of the Integrative Health and Wellness Program. Although Lamberson no longer uses the coaching part of the program, he still attends group sessions like tai chi.

As a result, he said, he has become more aware of his “numbers” — his weight, blood pressure, etc. — and is happier overall.

“It made a world difference in my life,” he said. “You make better decisions and change (mentally).”

Total heart health

Mindfulness is also being applied to treatment of veterans with heart conditions. They’re at a much higher risk for heart disease than the general public, said Dr. Anand Chockalingam during a Heartful Living workshop recently held at the veterans hospital.

Chockalingam, an associate professor of clinical medicine in the cardiovascular division at MU, gave an 8-week workshop at the veterans hospital about how meditation can lead to a healthy lifestyle. By engaging the body in heartful living, Chockalingam said, the health improvements come naturally.

“We are the most powerful nation, but we have the most health issues,” he said. Meditation can change this, he said.

Meditation is not only about taking time to clear the mind. It also involves a new outlook on life. Instead of focusing on the good and bad foods, it teaches people to feel hunger and celebrate the presence of friends, family and food, he said.

When it comes to a diet and exercise, Chockalingam recommends a plant-based diet with cardio three days a week. He emphasizes doing whatever exercises a person loves that are both challenging and require skill.

The heart needs a healthy diet, exercise and state of mind to function optimally, he pointed out. He uses the acronym HEART:

n Humility

n Empathy

n Aspirations

n Reciprocation

n Trust

“Heartfulness is the total, intense and complete devotion needed to succeed,” Chockalingam said.

TLC for PTSD

Dr. Grant O’Neal, a psychologist who works with the Post-traumatic Stress Disorder Clinical Team at the veterans hospital, acknowledges the benefits of the Integrative Health and Wellness program and refers patients to it as needed. However, he takes a different approach to the whole health of his patients.

“I often review a ‘Therapeutic Lifestyle Changes’ (TLC) list of eight approaches to well-being,” O’Neal said.

The eight approaches to well-being are:

n Relationships

n Giving back

n Exercise

n Nutrition

n Relaxation

n Recreation

n Nature

n Spirituality

There are similarities between wellness and TLC like exercise, nutrition, relaxation and spirituality.

By not focusing solely on exercise and nutrition, veterans hospital specialists have encouraged veterans to embrace a different type of mindset in order to live life to the fullest.

The program is available to all who are eligible for Veterans Affairs health care, and all are encouraged to join.

Leverett said: “The VA is in a unique position to show the country how this can work.”

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5.3 - KSWB (FOX-5, Video): [Army veteran’s outcry led to major changes at VA hospital](#)
(12 November, Phil Blauer, 442k online visitors/mo; San Diego, CA)

SAN DIEGO - Army Veteran Chad Cavanaugh is thrilled to be standing tall and pain-free.

A year ago, the 44-year-old married father of three's life was much different. His 6-feet, 5-inches tall frame was stuck in a wheelchair and he blamed inefficiency at the San Diego VA hospital in La Jolla for his condition.

"I'm done being strung along. I'm done being told to go to another appointment, another consultation. Here take some pills. Here's a crisp high five. See ya next time. I'm done with it," Cavanaugh told FOX 5 a year ago. "I'm no longer a husband to my wife, no longer a father to my daughters and I am pissed."

Cavanaugh's interview with FOX 5 last year got the attention of the VA regarding patient care protocol.

Chad Cavanaugh walks beside FOX 5's Phil Blauer a year after getting the VA's attention about his patient care.

"I got the help that I needed. I was fortunate to meet you. I was fortunate that you came in and took on my story and it got the ball rolling," he said.

Dr. Sina Pourtaheri is the VA's Director of Orthopedic Spine surgery. He said he's grateful he restored Cavanaugh's quality of life.

"I didn't realize how tall and big Chad is," said Pourtaheri. "When he came in and saw me right after the surgery, all of a sudden he's standing up there like an incredible hulk."

When Chad sees his old wheelchair he said it reminds him of pain and hopelessness, a bad time and a nightmare.

"I ran into a couple of bad apples," Cavanaugh said. "But the VA stepped up right away. Within a week of us meeting, I was on the surgery table."

VA Director Dr. Robert Smith said he's learned a lot from their mistakes with Cavanaugh's case. Smith said they have improved, but the system is still far from perfect.

"I'd say there are areas we need to work on," Smith said. "Especially in the emergency room where we have some wait time problems there. But in terms of getting patients into care, we've made a lot of strides."

These days, Cavanaugh continues his passion for comic book art and being the family man he always wanted to be.

"I can do all the things that I wasn't able to do," Cavanaugh said. "Taking the kids, spending time with them walking wherever they want to do...spending time with my wife, taking care of her, anything she needs done."

Digital Exclusive

Cavanaugh told FOX 5 that 14 weeks after his surgery, he and his wife were driving in downtown San Diego and happened upon a traffic accident near the police department on

Broadway. He said he ran over to a car that was on fire and saved a female driver who was trapped in the burning car.

He said it would have been impossible if he had still be stuck in the wheelchair.

"The car was filling with smoke," Cavanaugh said. "I leaned in to get her out, unbuckle her and just from that brief time my throat was destroyed for three or four days. So she would have easily asphyxiated in there."

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5.4 - Foster's Daily Democrat: [Providing a PATH for veterans](#) (12 November, Lara Bricker, 191k online visitors/mo; Dover, NH)

DURHAM — Ed Perkins balked when a group from Northeast Passage playing sled hockey on the rink at Strawberry Banke asked if he wanted to try it out.

"I said 'hell no, I can't do that' and I walked away," Perkins, 69, recalled this week.

The Navy veteran, who served during Vietnam, had a career as a journalist after he left the military. He retired and lived aboard a boat for six years, until a non-service related cervical spinal cord injury got so bad he could no longer get around.

"It got to the point I couldn't walk from the house to the car," Perkins said.

At home in Dover, Perkins became depressed and shut himself inside his home, isolated from the outside. He says he'd didn't think he could do anything anymore. Cathy Thompson, PATH (Promoting Access Transition and Health) program director at Northeast Passage at the University of New Hampshire, felt differently. She followed up with Perkins after that day at Strawberry Banke and suggested he give PATH a try.

"They literally brought me out of a deep hole," said Perkins, who not only joined the program, but took up long distance adaptive bike riding as a result.

Northeast Passage's PATH is a community/home based recreational therapy program available to veterans with disabling conditions who are served through the Manchester Veteran's Administration. Though PATH has been in existence since 1998, the VA will now pay for New Hampshire veterans to receive recreational therapy treatment through its Choice program, said Jill Gravnik, founder and executive director of Northeast Passage.

"This is the first time that recreational therapy has been considered a reimbursable service," Gravnik said.

Congresswoman Carol Shea-Porter, D-N.H., earlier this month announced an agreement between the Manchester VA Medical Center and Northeast Passage to provide community-based recreational therapy services to Granite State veterans. Northeast Passage has provided these services for quite some time, Gravnik said, adding inclusion of recreational therapy as a covered benefit is new.

While Northeast Passage has had provider agreements with the Manchester VA, the criteria were more specific on who would be covered, such as those with a catastrophic disability with permanent mobility impairment. Northeast Passage also applied for grant funding, which might be approved one year and not the next, to fund PATH. The change in Veteran's Choice reimbursement will provide a sustainable funding source to allow the program to continue to serve veterans and potentially reach veterans who previously would not have taken part, Gravnik said. The program has 80 veterans enrolled this year and served 112 last year.

PATH changed Perkins' outlook on life. He went from thinking he couldn't do anything to trying biking, downhill skiing, court sports, kayaking and fishing. Biking became his niche though he recalls being afraid to get on a bike in the beginning.

"It was like, oh my God freedom. I can do this," he recalled. "Now I can use the bike to access places I would never walk to."

Perkins uses a three-wheeled recumbent bike and has gotten his family involved in bike rides. He and his wife Nancy have taken trips in which they bike to different places and stay overnight there before returning home.

"Now I feel confident I can do almost anything," he said. "I just have to find a way to do it and they taught me that."

PATH uses a multifaceted approach combining education, application and psychosocial support systems to address a veteran's individualized needs. The approach is geared toward each person as an individual, Thompson said. It works to help with functional fitness and chronic health condition management as well as healthier body weight, blood pressure and blood sugar. Clients have also experienced increased happiness, confidence, self-acceptance, patience and social connectedness.

Eric Muirhead, 32, of Durham, credits the program with improving his mental health. Muirhead served 10½ years in the Navy, spending five stationed on the USS Enterprise. He spent more than 600 days at sea, which was hard on him mentally, resulting in post-traumatic stress disorder when he returned home. Being a new officer, he worked long days and vowed to work his way through the ranks. By his third year, he was supervising 22 people under his command.

When he got off the ship and started trying to get back to normal, attending college, living full-time with his wife and young son, it wasn't easy. He found himself drinking more and was isolated from his friends, all of whom were in the military. In the military, drinking had become a way of life. He and his crewmates drank because "today sucked" and tomorrow "would be worse."

As he adjusted to life after the Navy, Muirhead found he was reluctant to get involved with people and activities. He heard about PATH when he moved to Durham to take classes at UNH. "They were persistent," he said of his early encounters with the program. "I was skeptical."

Muirhead found writing and painting helped him immensely and was able to do both through PATH. He also realized he was harder on himself than others and learned to work through his own impatience and to accept help. "The idea of being helped by the community or the VA in the first place is a big hurdle for people," he said.

Muirhead acknowledges while he's come a long way, he still struggles. He is no longer with his wife and is staying with a friend because he has no other place to go. But he is looking ahead and applying for a writing fellowship. He credits PATH with helping him find and cultivate interests outside the military.

PATH graduates can go on to participate in adaptive sports with fellow veterans at Northeast Passage when they are ready.

"Recreation is the most amazing context for learning," Gravnik said. "And if you can find something people are interested in, something someone is passionate about, those lessons are more likely to stick."

For Perkins, not only did his love of biking stick, so did courage to try new things despite his disability. He approached the Dover Senior Center about joining a Pickle Ball team and has joined a writing group and an active retirement association.

"I've got a pretty full life," he said, adding his work at PATH helped. "It just started a better chapter in my life."

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5.5 - Independent Florida Alligator: [Pro-cannabis veterans protest opioids outside VA hospital, The group carried a casket full of pill bottles across Archer Road](#) (13 November, David Hoffman, 63k online visitors/mo; Gainesville, FL)

For more than two years, U.S. Navy veteran Gabriel George wasn't in control.

A motorcycle accident in 2009 left George in a coma for three weeks, with a paralyzed right arm and two fractures to his neck vertebrae. Through 2011, he tried everything from Percocet and morphine to spinal cord stimulators. It wasn't until his doctor recommended medical marijuana the 31-year-old said he felt like himself again.

"I was on every pill they could prescribe me, all it did was zombify me or constipate me," he said. "I'm here now, I'm alive because I'm a medical marijuana user."

George and five others spent Veterans Day protesting outside the Malcom Randall VA Medical Center, located at 1601 SW Archer Road, fighting opioid deaths and in support of medical marijuana for veterans.

The veterans marched across the intersection of Southwest Archer Road and Center Drive carrying a casket draped in an American flag. At the front lawn outside the hospital, the group then folded the flag and poured hundreds of empty pill bottles inside the open casket.

Joshua Littrell, a protest organizer and the founder of the nonprofit Veterans for Cannabis, said the demonstration was meant to show how deadly opioids are.

With grief in his eyes, Littrell called for a moment of silence.

"Each one of these bottles is a brother and sister no longer with us," the 37-year-old U.S. Air Force veteran said. "Each one of these here is a life."

Gathered at the side of the casket, as cars on Southwest Archer Road honked in support of the group's signs that read "Pills Kill, Cannabis Saves Lives," the veterans shared their stories.

Michael Thompson held his wife DeAnn's hand and fought back tears.

It was Oct. 10, 2008, when Thompson's daughter, Cheyenne, passed away from grand mal seizure. She was a month shy of her third birthday. Shortly afterward, the U.S. Air Force veteran turned to alcohol and tried to take his own life.

He eventually turned to marijuana to treat the emotional trauma he felt and later learned the drug might have helped Cheyenne's genetic predisposition to seizures.

"The only thing that mattered to me in the world was my daughter, and I couldn't fix her," he said. "My daughter could still be alive today, if she had access to cannabis."

For U.S. Army veteran Jimmy Johnston, access to marijuana is the difference between life and death.

Johnston, a lead coordinator for pro-marijuana and veteran support group Weed for Warriors, said he's seen veterans wait as long as two and a half years for an MRI scan, get hooked on pills and then turn to cheaper street drugs like heroin when they can't afford what the VA prescribes.

So much of the pain, addiction and overdose could be solved with medical cannabis, he said.

"One plant to treat it all," he said. "Instead of the 20 different medications the VA is trying to prescribe you, you got one plant that will solve all of it with no side effects."

Littrell, who served as an army biomedical engineer, said he plans to take Veterans for Cannabis' platform to Washington, D.C., to urge Florida and Georgia representatives to grant veterans greater access to medical cannabis.

Any demonstration he organizes, be it a protest or lobbying effort in Tallahassee, he wears a suit and tie and never says "marijuana," only cannabis. Otherwise, no one would take his group seriously, he said.

"I thought my fighting days were over when I got out of the Army," Littrell said. "They're not. Now I'm fighting for my brothers and sisters here at home, to make sure we're getting the care we're owed."

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5.6 - KBCS (FM-91.3, Audio): [Navigating the Department of Veterans Affairs as a Transgender Veteran](#) (11 November, Yuko Kodama and Ruth Bly, 1.1k online visitors/day; Bellevue, WA)

A federal judge has placed a temporary stay on President Trump's ban on transgender soldiers. Meanwhile, transgender veterans struggle to navigate for appropriate healthcare through the

Department of Veterans Affairs. KBCS's Yuko Kodama spoke with transgender U.S. army veteran Brooke Wylie about her experiences in advocating for services.

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6. Suicide Prevention

6.1 - Daily Herald: [Vietnam veteran's mission: Saving my brothers from their demons](#) (12 November, Marie Wilson, 1.5M online visitors/mo; Arlington Heights, IL)

When Bill "Fallout" Atkinson and members of Rolling Thunder Illinois Chapter 1 get together, they hop off their motorcycles and greet each other with a hug and a "welcome home."

The closeness was a bit much for Manuel Lopez, who joined a few years back to help veterans like his son Matthew, who served in the Marines for 26 years.

"What kind of group did I join? They're all hugging!" says Lopez, 76, of Naperville. "They said it's a habit. When they were in Vietnam, they would hug because they didn't know if they were going to see each other again. How do you live like that?"

Veterans such as Atkinson, who served in the Navy in Vietnam from 1968 to '69, say it's a matter of necessity.

"You didn't know what tomorrow was going to bring," he says. "You had to trust each other."

The consequences of that uncertainty came home with them.

Fear of loud noises. Depression. Thoughts of suicide. Hypervigilance. A constant state of alert.

"You don't realize it while you're there because it's just how you have to be. It's like you just drank a pot of Starbucks. You're just aware," says Atkinson, 69, of Glendale Heights. "That alone can have an immense effect on somebody. Some guys never really adjust or get back."

It took Atkinson decades to "get back" to a healthier mental state for noncombat life.

When he left the service at 21 and became a mechanic, then a plumber, he didn't realize he had wartime demons to address.

"I really just kind of buried it for a long time," he says.

He busied himself with work and carried on that way for more than 30 years.

Then he visited the Vietnam Veterans Memorial Wall.

His first trip to the wall in Washington, D.C., came in 2003, and it opened the floodgates of suppressed emotion.

"That started a whole long period of me dealing with it," he says, about the "period of darkness" and depression he battled and continues to address through counseling.

"It was difficult," he says. "I don't talk about how I feel well. They (counselors) want to know how you feel."

Now Atkinson feels driven -- driven to prevent veterans from ending their lives by providing connections to the Veterans Crisis Line.

The line, established in 2007, receives 250,000 calls each year nationwide and helps veterans with anything causing a crisis in the immediate moment, be it thoughts of suicide, a family problem, an urgent home repair or a financial emergency.

Trained responders from the Department of Veterans Affairs handle the calls and dispatch the appropriate help or provide links to local organizations for assistance. Veterans can reach the line by calling (800) 273-8255, texting 838255 or starting a chat at VeteransCrisisLine.net.

Morgan Woolley and Jordon Wolf, veterans suicide prevention coordinators at Edward Hines Jr. VA Hospital, say police are sent to only 1 percent of calls to conduct a well-being check. Roughly 10 percent of calls are forwarded to a suicide prevention coordinator. The rest are addressed through other resources.

"We just want people to get whatever help they need in that moment," Woolley says.

Whenever Rolling Thunder hosts an event, Atkinson is there with materials promoting the Crisis Line -- business cards, pamphlets, wristbands, coasters, water bottles -- anything to increase knowledge of the mental health needs of veterans.

"People don't know what to say," Atkinson says. "If somebody is depressed, there's still that shadow over mental illness."

Atkinson took medication for a time to stabilize his depression, and he wants people to know that's OK. He continues to meet with a counselor he found through the VA. But his most effective way of maintaining his mental health has been through the second brotherhood he's found.

The first came when he was in the "Brown Water Navy," serving aboard river boats in Vietnam. The second is the members of Rolling Thunder, a group he hopes can appeal to younger veterans as well as those from his era.

"We sit around and talk and have coffee," he says. "We have a common bond."

- If you or a loved one is in crisis, go to the nearest emergency room, visit the Veterans Crisis Line at www.veteranscrisisline.net, the National Suicide Prevention Lifeline at www.suicidepreventionlifeline.org, or call (800) 273-8255, the number for both services.

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6.2 - Lake News: [OUR VIEW -- The hardest fought battle can be at home](#) (11 November, Editorial Board, 45k online visitors/mo; Camdenton, MO)

The U.S. Department of Veterans Affairs reported that in 2016 approximately 20 suicides among veterans were recorded each day. Some advocacy groups now place that number at 22 each day.

Often times, the hardest fought battle veterans face is returning to normal life. At certain times in our country's history, most notably during the Vietnam era and seemingly over the last decade, civilian society and our government have not always given these courageous men and women our deserved attention and care.

Ask anyone who has lived through both Vietnam and the ongoing 16-year-long Global War on Terrorism to explain the parallels in our society, government and international foreign policy to those more than four decades ago.

Imagine risking life and limb for one's country only to be greeted with a lack of empathy upon return. Imagine being a teenager drafted into a battlefield, growing up both mentally and physically in a place surrounded by violence and destruction. Imagine how a firework explosion can sound like a gunshot when the nightmares won't go away and the scenes won't stop replaying.

Now imagine coming back home to places where firearms are forbidden, where security is far less restrictive, where dozens of people can blend into crowds, where a brother or sister isn't covering your blind spot.

The Lake Sun has shared dozens of our local military members histories, triumphs and darkest days via our Veterans Day 2017 special tab as well as daily features on the front page throughout this week; but it's often the untold stories of tragedy years or decades later that go unreported.

Suicide rates among U.S. veterans are staggering. The U.S. Department of Veterans Affairs reported that in 2016 approximately 20 suicides among veterans were recorded each day. Some advocacy groups now place that number at 22 each day.

A comprehensive study released in 2017 reported that the suicide rate among middle-age and older adult veterans remains high. In 2014, approximately 65 percent of all veterans who died by suicide were age 50 or older.

These statistics tell us that these are veterans of the Vietnam War, arguably the most controversial event in the last half-decade as far as intense political and cultural opposition goes. It also tells us we haven't done enough to meet their needs upon returning home. We still, sadly, read stories about the side effects of Agent Orange and nightmares of the jungles.

History tends to repeat itself. As we learn more and more about the effects of Post-Traumatic Stress Disorder and other mental and physical injuries to the brain caused by blunt forced trauma or emotional distress, we hope our current and future veterans do not face the same struggle for proper medical treatment or help when needed.

Veterans who are in crisis or having thoughts of suicide, and those who know a veteran in crisis, can call the Veterans Crisis Line for confidential support 24 hours a day, seven days a week, 365 days a year. Call 800-273-8255 and press 1, chat online at VeteransCrisisLine.net/Chat, or text to 838255.

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7. Women Veterans / Homelessness / Benefits / Cemeteries

7.1 - FOX News (AP): [Rhode Island opens state-of-the-art home for veterans](#) (11 November, 32.5M online visitors/mo; New York, NY)

PROVIDENCE, R.I. – Rhode Island has unveiled a new, state-of-the-art home for veterans on Veterans Day.

Democratic Gov. Gina Raimondo hosted the state's Veterans Day ceremony and a traditional ribbon cutting Saturday at the home in Bristol, Rhode Island. Veterans began moving in last week, prior to the ceremony, and completed the move earlier this week.

The new 208-bed home allows veterans to live in cottages equipped with a private bedroom and bathroom. There's a central location for social activities and the chapel, salon, coffee shop, library, medical examination area and other services.

"Over 16 major trades have contributed to building this beautiful new home for our honored Veterans, and the pride in their work is evident in every detail," Raimondo said. "I'm proud that Rhode Island is now leading the way in recognizing the sacrifice of those who've served our great nation. Our veterans deserve nothing less."

Rhode Island is one of the first states to use this new community living concept for veterans' long-term care, said Kasim Yarn, the state's director of veterans affairs, who attended the ceremony Saturday.

"It dispenses with the traditional, institutional model," he said in a statement Friday. "This is what our veterans have advocated for. And with our veterans' population being overwhelmingly earlier-era veterans, World War II, Korea, Vietnam, we're ahead of the curve. They deserve nothing less."

The veterans had previously lived at a home dating back to 1955, on the same site in Bristol.

U.S. Veterans Affairs Secretary David Shulkin visited the new home in May to help dedicate it. He said it sets the standard for the way the nation should be caring for veterans and praised the state and federal partnership that helped move the \$121 million project forward.

Construction began in 2015. Members of Rhode Island's congressional delegation and other state officials joined Raimondo at the ribbon cutting to honor veterans.

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7.2 - WWL (CBS-4, Video): [Community feeds homeless veterans on Veterans Day](#) (11 November, Katie Steiner, 863k online visitors/mo; New Orleans, LA)

NEW ORLEANS – For many Americans, Saturday was a day to honor our veterans, those on active duty and who have served in the past.

A group of community members gathered together to make sure that one group of veterans was taken care of.

Veterans Day at the Veterans Affairs Medical Center means a lot of classic Louisiana food. Delicious food going into the stomachs of U.S. Military veterans.

"We got Jambalaya, and hot dogs and salad and cookies," volunteer Sarah Heximer said.

The event is an outreach program where most of the veterans are homeless or close to being homeless.

Larry Tero is one of those veterans and had cancer. As a result, he lost his voice box and uses an electrolarynx to speak. He said it means the world to him to have the support of his fellow Americans.

"It's wonderful, wonderful. Wonderful things, makes you feel great," Tero said.

Tero served from 1969-1973 and always has a smile on his face.

"You always gotta think positive in this world today. You gotta stay positive whatever you do," Tero said.

Owen Doss is another veteran that enjoyed the event.

"I think it's great that they care enough for us that they would do something like this. I appreciate everything they do for us," Doss said.

However, for the volunteers and workers at the VA, they appreciate him even more.

"They have done so much for us and our freedom, and it's just really great to help to give a little back. It doesn't even compare to what they've done for us," Heximer said.

Fernando Rivera, VA Medical Center Director, said that he feels honored to serve those who have served for the country.

"Being able to serve the men and women who put their lives on the line for our freedom is a privilege," Rivera said.

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7.3 - Observer-Dispatch: [Homeless veterans declining or growing?](#) (12 November, Amy Neff Roth, 305k online visitors/mo; Utica, NY)

On Friday, the day before Veterans Day, a homeless veteran showed up at the Central New York Veterans Outreach Center in Utica.

The man had been to the Rescue Mission of Utica, but its shelter was full, he told workers at the outreach center. So the center's case managers went to work, arranging a bed for the weekend and searching for a longer-term solution.

“Just since Oct. 1 ... we’ve already housed 15 homeless veterans, and that’s just our agency,” said Vincent Scalise, outreach center founder and executive director.

From Scalise’s viewpoint, the level of homelessness among veterans seems to have held steady in this area over the past few years.

That view runs contrary to a report by the Office of New York State Comptroller Thomas DiNapoli, released on Friday, that says the number of homeless veterans in the state dropped 78.4 percent between 2011 and 2016, the biggest drop of any state. In 2010, the U.S. Department of Housing and Urban Development and the Department of Veteran Affairs found that half of homeless veterans lived in just four states — New York, California, Florida and Texas.

In Oneida and Madison counties, homeless surveys that measure homelessness on one day in January each year have shown the number of homeless veterans falling from 26 in 2009 to none last year, said Scott McCumber, an associate planner with the state’s Continuum of Care program.

But those statistics — and the statistics in the comptroller’s report — only apply to one day a year and they use a specific definition of homelessness — someone staying in a shelter, living in transitional housing or living on the street or staying in a motel room while waiting for space in a housing program, McCumber said.

That definition isn’t broad enough, said Richard Synek, founder of Feed Our Vets. His organization hears daily from veterans who are homeless or who are facing homelessness soon. He doesn’t think fewer veterans are homeless, not if you broaden the definition.

Homeless veterans in New York

2011: 5,765
2012: 4,961
2013: 4,959
2014: 2,542
2015: 2,399
2016: 1,248

“We do have some veterans that literally live on the streets,” he said. “But homeless just means you don’t have a place of your own.”

Scalise agreed that official statistics miss homeless veterans.

“One night they’re at so-and-so’s house. The next night they’re at so-and-so’s house,” he said. “The next night they’re sleeping in the car. They don’t have permanent, supportive housing.”

U.S. Rep. Claudia Tenney, R-New Hartford, acknowledged the ongoing problem of veteran homelessness. The federal government is working to address veterans’ issues, she said.

“Fourteen bills were passed this past week on veterans’ issue on all type of initiatives ... to help veterans get jobs, to take care of their families, to deal with the mental health illnesses,” she said.

“But,” she added, “we have a long way to go.”

In Utica, the Altamont Program specifically helps homeless veterans, providing studio apartments to 11 single men and providing services to help them transition back into the community. During his three years with the organization, Residential Director Robert Green said 15 men have moved into their own apartments. When one of the program’s studio apartments becomes available, it’s usually filled again within three week, Green said.

Although Altamont only takes in single men, homeless veterans can be any age and are equally likely to be women, although the majority of female veterans have children, Scalise said.

Federal funding that allows the outreach center to help veterans find housing has remained flat for five years, Scalise said. Last year it helped 70 veterans but ran out of money in August and had to engage in a flurry of fundraising to keep offering help, he said.

The center is working on a more permanent solution. It broke ground in September on 18 housing units for veterans, 10 for stays of up to 24 months and seven for permanent housing (with the 18th unit for a live-in superintendent).

Central New York also benefits from the services of Soldier On, a regional nonprofit with programs to prevent homelessness among veterans, McCumber said. And a Veterans Administration program puts homeless veterans into Section Eight housing immediately and then provides intensive case management to help them get back on their feet, McCumber said.

Homelessness never will stop being an issue for veterans, but in most cases, they shouldn’t stay homeless for more than two or three days because of all the existing programs, McCumber said.

“We still do see homeless veterans pretty often,” he said, “but we have the capacity to deal with it.”

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7.4 - Times Telegram: [New bill would expand veterans’ burial benefits](#) (12 November, Greg Mason, 44k online visitors/mo; Herkimer, NY)

NEW HARTFORD — Donna Osier’s family has a history of military service.

The Sherrill resident’s husband, Chuck Osier, chose to serve in the Air Force for four years during the Vietnam War. Her brother served as a senior petty officer with the U.S. Navy. And before them, her father served in the Navy in Korea. All three were cremated when they died.

Chuck Osier, 64, died in 2015. But like his wife’s father and brother, he was not honored with a headstone, marker or medallion from the Veterans Administration because the VA does not offer those burial benefits for veterans that are not laid to rest in a traditional cemetery — something Osier could not accept.

“When my husband passed away, I couldn’t believe that it was still not a possibility,” said Osier, who lived in Vernon at the time.

Osier has sought to change that policy since her husband's death, working with the offices of former U.S. Rep. Richard Hanna and his successor, U.S. Rep. Claudia Tenney, R-New Hartford.

The fruits of were realized Friday as Tenney introduced the Chuck Osier Benefits Act of 2017.

The bill would expand VA burial benefits. For those who are cremated and laid to rest in a nontraditional resting place, the bill would require the VA to offer either a commemorative urn or a plaque to families, according to Tenney's office.

Tenney cited statistics from the National Funeral Directors Association saying the number of cremations nationwide has risen nearly 50 percent since 2005 — and was preferred over traditional burials for the first time in 2016.

Tenney said the bill will serve to keep pace with these trends.

"We want to make sure that all of those veterans who do have that choice, their families and that veteran are recognized for their service," she said.

Osier, her son Chris and her daughter-in-law Melanie joined Tenney Friday at the congresswoman's New Hartford office — the 242nd birthday of the Marine Corps.

"Without their support and their help, we wouldn't be here today," Osier said of Tenney and Hanna. "I am so, so thankful. This bill is going to allow all of the other families that have nontraditional resting places for their loved ones to have the opportunity to at least receive something from the government that they offered to give so much to."

Tenney pointed to the Chuck Osier Act of 2017 as one of more than a dozen recently introduced before Congress to benefit veterans, including another of hers — the Veterans Entrepreneurs Act — that would create a tax credit to cover a portion of initial franchise fees for veterans looking to start a business.

The congresswoman said Osier's efforts exemplify how laws are made, starting with ideas from the constituency and working up the chain. It's a process Osier said she did not necessarily believe in when she first sought federal assistance more than two years ago.

"Who would listen to me?" she said she asked herself then.

Fast-forward to now, Osier was asked what she thought her husband would say if he still was here.

"He would say, 'You did it. You did it,'" Osier said. "He would start the battles and I would finish them because I don't give up. He'd be proud of me the way I was always proud of him."

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8. [Other](#)

8.1 - The Washington Post: [Veteran who lost both legs completes 31 marathons in 31 days, runners trailing his every step](#) (12 November, Kelyn Soong, 43.9M online visitors/mo; Washington, DC)

Marine Corps veteran Rob Jones wanted to change the narrative of the broken-down, wounded veteran struggling to transition to civilian life. So for the past 31 days, he kept running.

He ran to prove a point and to inspire. Jones, who had both legs amputated after being wounded by a land mine while serving in Afghanistan, ran the distance of 31 marathons over 31 days in 31 different cities.

On Saturday afternoon, with his back aching and legs sore, the 32-year-old Jones finished his month of marathons near the steps leading up to Lincoln Memorial on a frigid Veterans Day. The crowd of several dozen supporters showered him with cheers as he crossed the tape. Jones then kissed his wife, Pam, smiled and took a few moments to let the accomplishment soak in.

"I decided I would create this story of a veteran that was wounded and thrived from it," Jones said minutes after finishing. "I think I accomplished that mission."

All month, people followed Jones wherever he went like Tom Hanks in the film "Forrest Gump." He started his journey in London, where Pam is originally from and his team drove approximately 10,000 miles across the United States in a 35-foot-long motor home, where they slept.

From the time he stepped out of the vehicle, there were runners waiting for him, regardless of the city or weather.

On Saturday, the temperature dipped below freezing for most the day, but there were never fewer than 20 runners who joined Jones on the mile-plus loops surrounding the Reflecting Pool.

"The support has been incredible," said Jones, who was honorably discharged from the Marine Corps in 2011. "It's such a great compliment to have all these people come out and hear my story and deem it worthy of their time on the weekend, on a holiday and come out and support me."

Some had heard of Jones's story from friends or read about it online, about how Jones had both legs amputated after being wounded in Afghanistan in 2010 and how he has since become a Paralympic bronze medalist in rowing, biked 5,180 miles across the country and devoted his life to raising money for veterans' charities.

Jones, a Vienna resident, has a lifetime goal of raising \$1 million and estimates that his latest challenge has raised between \$125,000 to \$130,000. The bike challenge raised an additional \$126,000, Jones said.

"I think it's amazing," said 12-year-old Michael Vertino of South Riding, Va. "I think it's pretty cool. He'll go down as a legend."

Michael had heard about Jones's 31-marathon journey from his father, AJ, a Marine Corps veteran. "I thought he was crazy," Michael said was his initial reaction, but he then texted his

friend and classmate, Quinn Grimes, and asked him if he wanted to run with Jones. Quinn didn't hesitate to sign up.

"The highlights for me . . . have been seeing kids run out and run with him and ask him questions," Pam Jones said. "Kids have this amazing ability to ask these really innocent questions that will really impact them for the rest of their lives."

But the trip also had painful lows. On Tuesday, Jones slipped on a Nashville bridge and badly injured his back.

During a break on Saturday, a woman asked Jones what his plans were to relax.

"I think I'll go run," he deadpanned.

Jones later said he actually would have gone running in the coming days but that his back injury will force him to take a few days completely off.

"I hate seeing him in pain, but I also know that if this was easy, he would be frustrated because he wants it to be hard," his wife said. "He wants to be an example of making something hard so that you can challenge yourself to be a better person."

As for his next challenge, Jones said he doesn't yet have anything planned. He'll "use physical exercise for fun" and also indulge in other hobbies that he hadn't had time for like reading books and listening to podcasts. He'll maybe even return to performing a few open-mic stand-up comedy shows.

But those who know Jones best say it's fair to expect something special.

"Everything he does, he takes it to the extreme and it's epic," said 35-year-old Eric Deavilla of Boston, who served with Jones in Afghanistan. "Whatever he does next, it's going to be worth watching."

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8.2 - Bustle: [6 Things Trump Promised Veterans He'd Change — But Hasn't](#) (12 November, Morgan Brinlee, 16.3M online visitors/mo; New York, NY)

Days before Veterans Day on Nov. 11, the White House released a statement in which President Donald Trump claimed "tremendous progress has been made in a short period of time" regarding his administration's efforts to reform the Department of Veteran Affairs and better support veterans. But some have argued the president's claims about progress are a bit overblown, given the promises Trump has made to veterans that have yet to be fulfilled.

"From insulting POWs by saying they were only heroes because they were captured, to insulting families of the fallen, to stifling veterans charities until the Washington Post exposed him, to moving to privatize the Department of veterans affairs, Donald Trump has shown that his feelings about veterans only go as far as how much he can get out of us for his own purposes," Will Fischer, an Iraq War vet and VoteVets' director of Government Relations, tells Bustle. "Donald Trump is easily — easily — the most anti-veteran president in the history of this country. It's not even close."

Reactions to the president's actions regarding veterans are mixed. While some like Fischer have condemned Trump as being anti-veteran, others argue there's been both harm and help. "Veterans and the military have been a common theme in rhetoric from the White House," Allison Jaslow, an Iraq War veteran and executive director of Iraq and Afghanistan Veterans of America (IAVA) says. "That has both benefited and hurt our community, as new laws to strengthen the VA have landed on the president's desk, but unfortunate politicization has distorted our diversity."

Jaslow also criticized the White House's silence on the Marines United nude photo scandal (which involved a private Facebook group of some 30,000 active and retired military men crowdsourcing nude photos of female service members) and IAVA's "She Who Borne The Battle" campaign (which seeks to recognize and improve services for female veterans). "[It's] disappointing to say the least, and reaffirms to women veterans that they're invisible," Jaslow says.

There Are Still Significant Delays In Access To Care

One of biggest issues facing veterans is delayed access to health care. In a speech at a Sept. 22 campaign rally for Alabama Senate candidate Luther Strange, Trump appeared to claim veterans were now facing fewer delays when attempting to obtain immediate care. "Now [veterans] go right outside, they go to a doctor in the area, we pay the bill, and it's the least expensive thing we can do and we save everybody's life and everybody's happy," the president told the crowd in Huntsville, Alabama.

This wasn't the first time Trump had made such a claim. During a speech in July, the president appeared to claim veterans were no longer having to wait for health care. "I used to go around and talk about the veterans and they'd stand on line for nine days, seven days, four days... 15 days. People that could have been given a prescription and been better right away end up dying waiting on line," he said. "That's not happening anymore."

Except that according to multiple other sources, veterans are still facing lengthy wait times when seeking access to medical care. The Associated Press, for example, reported having recorded wait times of more than two months and the Government Accountability Office has reported wait times have the potential to be as long as 81 days, meaning veterans are not getting the immediate care Trump has touted.

Limited Access To Care

While the Choice Program does allow veterans to receive care from a doctor outside a VA facility, it's not quite as easy as Trump has made it sound. For example, the program only allows visits to outside doctors if an individual's wait time is more than 30 days or if their travel distance to a VA facility would be more than 40 miles.

In a July 27 editorial for USA Today, Department of Veteran Affairs Secretary David Shulkin claimed the VA had increased the number of authorized outside care appointments by 26 percent compared to that same period of time last year. However, an unexpected budget shortfall announced in August reportedly caused the VA to begin limiting the number of outside care referrals it authorized, thus limiting access to care, according to the Associated Press.

And according to the White House, the Trump administration has overseen the VA's launch of the new "Access and Quality Tool," which is supposed to enable veterans to see wait times at VA locations. But tied into the VA's authorization of outside care are continued criticisms that the its wait time data is unreliable.

According to a USA Today review of a dozen VA facilities in North Carolina and Virginia, inaccuracies in wait times for appointments was widespread last year. In many cases, understated wait times prohibited veterans from being able to seek outside care. It is unclear if the wait time data being provided by the VA under the Trump administration is as unreliable.

Lengthy Wait Times For Medical Care

In June the Department of Veteran Affairs announced it would overhaul its IT system in an effort to reduce wait times for veterans seeking medical care by adopting the Electronic Health Record system used by the Department of Defense. However, this overhaul is expected to take seven to eight years to complete, according to Shulkin. Moreover, the total cost of overhauling the system remains unknown although estimates have put it between \$4 billion and \$16 billion.

Disability Compensation Appeals Backlog

In what the White House defined as an effort to streamline disability compensation appeal claims, Trump signed the Veterans Appeals Improvement and Modernization Act of 2017 in August. The legislation allows vets to file a so-called "express" claim in exchange for waiving their right to a hearing and to submit any new evidence.

However, the legislation does nothing to reduce or address the current backlog of appeals. Which, according to the Associated Press, stands at more than 470,000. Moreover, according to Shulkin, the VA would need \$800 million and 10 years to clear the current backlog of appeals.

Not Enough Funding To Help Veterans

A reportedly unexpected shortfall in funding for the VA's Veterans Choice Program led Congress to approve \$2.1 billion in emergency stopgap funding in August in order to keep the program, which provides medical care for tens of thousands of veterans, afloat. However, the VA announced the emergency stopgap funds, which were supposed to hold the program over until February of 2018, would likely run out before then.

In order to keep the Veterans Choice Program going, legislators must approve even more funds by the end of the year or the tens of thousands of veterans could have their care impacted.

Trump's Hiring Freeze Hurt Veterans

Almost immediately after taking office, Trump imposed a federal hiring freeze, which critics have claimed hurt veterans in more than one way. Veterans get federal hiring preference and, according to The Hill, they make up a fairly significant portion of the federal employees. For example, The Hill reported veterans accounted for nearly one third of all new hires within the federal government in the 2015 fiscal year. In instituting a federal hiring freeze, Trump effectively limited job opportunities for veterans living in and around Washington, D.C.

According to advocates, Trump's hiring freeze likely had another impact on veterans. Although Trump spent much of his campaign promising improvement and reform at the Department of

Veteran Affairs, his hiring freeze only exacerbated the department's already significant understaffing problem.

While his administration has vowed to take care of veterans, certain promises Trump's made have gone unfulfilled. According to exit polls conducted by CNN, veterans voted for Trump in the 2016 presidential election by a roughly 2 to 1 margin, meaning they made up a fair portion of his support base. But while Trump boasted of big plans to boost veteran services and reform the VA on the campaign trail, his progress appears to have faltered.

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Veterans Affairs Media Summary and News Clips

13 November 2017

1. [Top Stories](#)

1.1 - Cincinnati Enquirer (Video): [What is post-traumatic stress disorder? How can I help someone who has it?](#) (12 November, Keith BeiryGolick, 3.9M online visitors/mo; Cincinnati, OH)

PTSD is a mental health disorder that occurs in some people who go through traumatic events and are not able to process them afterward. About 8 million adults suffer from PTSD during a given year, according to the U.S. Department of Veterans Affairs. This is only a small portion of those who have gone through a trauma. Dr. Kathleen Chard is a nationally recognized expert on the mental disorder. She directs the VA's Trauma Recovery Center.

[Hyperlink to Above](#)

1.2 - Springfield News-Leader (Video): [VA doctor: I want you to see the health care system I do](#) (12 November, Megha Garg, 859k online visitors/mo; Springfield, MO)

When I share with someone that I work at the Veterans Health Administration, I often get one of two responses: "Oh, I've heard the care isn't that good there." Or, "What's the latest on the scandal going on at the VA?" Perhaps this is the inevitable conclusion for someone only reading news headlines about the Department of Veterans Affairs...

[Hyperlink to Above](#)

1.3 - WGN (CMN-720, Audio): [Dr. David Shulkin, U.S. Secretary of Veterans Affairs: Increasing Service and Accountability, Bringing the Number of Veteran Suicides to Zero](#) (12 November, 162k online visitors/mo; Chicago, IL)

As we pay tribute to the many brave generations who have served our country, we'll discuss how we are taking care of our veterans and their families as Dave Plier welcomes Dr. David Shulkin, US Secretary of the Department of Veterans Affairs.

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2. [Greater Choice for Veterans](#)

2.1 - Gainesville Sun: [Malcom Randall VA Medical Center drops in rating, lab on probation](#) (12 November, Paige Fry, 440k online visitors/mo; Gainesville, FL)

The Malcom Randall VA Medical Center dropped lower in national ratings — from a three to a two on a five-point scale — partly due to patients dying there from pneumonia and sepsis. The Gainesville hospital has about 370 vacancies, ranging from housekeepers to physicians and nurses, which union president Muriel Newman said has been causing severe problems.

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2.2 - Times-News: [Reader Comment: Honoring veterans by effectively supporting their service](#) (12 November, Sen. Mike Crapo (R-Idaho), 201k online visitors/mo; Twin Falls, ID)

Veterans Day — a day to honor veterans for their service to our nation — is a good time to take stock of where we are in ensuring that they have access to quality health care and other services that support their enduring commitment. So far this year, Congress has passed and

President Trump has signed into law the following important veterans-related legislation that I supported:

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2.3 - Mankato Free Press: [In Crossfire Rural vets in midst of health care debate, Lawmakers try to fix Choice Program](#) (12 November, May Rao, 192k online visitors/mo; Mankato, MN)

When Phil Klenk injured himself with a shovel during yard work, his wife, Lisa, drove him more than an hour from their home in Winthrop to the VA hospital in Minneapolis for urgent care. It wasn't supposed to work that way. Both veterans, the Klenks had high hopes for a federal program that promised an easier way for rural service members to receive medical treatment close to home.

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2.4 - Panama City News Herald: [OUR VIEW: Veterans need to be helped](#) (12 November, Editorial Board, 189k online visitors/mo; Panama City, FL)

Trump has done more than mouth off, working with Congress to better serve roughly 18.5 million American veterans. This past weekend, Americans celebrated Veterans Day, honoring the brave men and women in uniform who have served their country — in many cases, risking their lives on the battlefield — to defend our nation and its freedoms.

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2.5 - WBIW (AM-1340): [Donnelly Announces Support for Bipartisan Legislation to Help Prevent Overmedication Of Veterans](#) (13 November, 57k online visitors/mo; Bedford, IN)

The Veterans Overmedication Prevention Act, introduced by the Chairman of the Armed Services Committee, Senator John McCain (R-AZ), would commission an independent review of the deaths of veterans who died by suicide or drug overdose over the last five years while receiving care through the Department of Veterans Affairs (VA) and an assessment of the role that prescription medications may have played.

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2.6 - Tampa Bay Reporter: [Bilirakis Seeks To Expand Dental Care For Veterans](#) (12 November, 17k online visitors/mo; Tampa, FL)

U.S. Rep. Gus Bilirakis, R-Tarpon Springs, is sponsoring a bill that's designed to expand access to dental care for veterans. The bill, called the Veterans Early Treatment for Chronic Ailment Resurgence through Examinations Act, arose because of conversations Bilirakis had with veterans while co-hosting the Stars, Stripes and Smiles event each year, to provide dental care to 75 veterans at no cost.

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3. [Modernize Our System](#)

4. [Focus Resources More Efficiently](#)

4.1 - The Register-Herald: [Raleigh County Veterans Court helps vets get their lives back on track](#) (12 November, Wendy Holdren. 77k online visitors/mo; Beckley, WV)

In an office outside Judge Andrew Dimlich's chambers on the bottom floor of the Raleigh County Judicial Annex, nine men and women in professional attire sit at a boardroom table. At the center of the table, among their legal pads and coffee cups, is a landline telephone dialed into the Martinsburg VA Medical Center.

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4.2 - Flyer Group: [Cascade students honor veterans](#) (12 November, Abigail Church, 46k online visitors/mo; Avon, IN)

Cascade High School's AP Government class recently visited the Richard Roudebush V.A. Medical Center in Indianapolis to deliver more than 1,300 basic supplies and toiletries donated to U.S. veterans. Each year CHS has a Veterans' Day program honoring veterans, but also hosts a school-wide project to give back to the veterans in the community.

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5. [Improve Timeliness of Service](#)

5.1 - WCMH (NBC-4, Video): [Sprayed and betrayed: Veterans exposed to Agent Orange feel abandoned by VA](#) (12 November, 1.1M online visitors/mo; Columbus, OH)

Veterans descended on Bay Pines VA Medical Center in Florida Thursday to protest what they're calling discrimination. "Our country sent us to war and we expected them to take care of us, and they won't do it," said Blue Water Navy Vietnam Veteran Mike Kvintus.

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5.2 - Standard-Examiner: [Veterans' Hospital takes wellness approach to combat veteran health problems](#) (12 November, Elizabeth Quinn, 803k online visitors/mo; Ogden, UT)

Opioid addiction, heart disease and post-traumatic stress disorder are some of the most common health issues among veterans, and Truman Veterans' Hospital is increasingly finding that the path to recovery for veterans is through wellness. The veterans hospital has been doing wellness for five years. But last year, it brought together the pieces, formalized its efforts and named it the Integrative Health and Wellness Program.

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5.3 - KSWB (FOX-5, Video): [Army veteran's outcry led to major changes at VA hospital](#) (12 November, Phil Blauer, 442k online visitors/mo; San Diego, CA)

Army Veteran Chad Cavanaugh is thrilled to be standing tall and pain-free. A year ago, the 44-year-old married father of three's life was much different. His 6-feet, 5-inches tall frame was stuck in a wheelchair and he blamed inefficiency at the San Diego VA hospital in La Jolla for his condition.

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5.4 - Foster's Daily Democrat: [Providing a PATH for veterans](#) (12 November, Lara Bricker, 191k online visitors/mo; Dover, NH)

Northeast Passage's PATH is a community/home based recreational therapy program available to veterans with disabling conditions who are served through the Manchester Veteran's Administration. Though PATH has been in existence since 1998, the VA will now pay for New Hampshire veterans to receive recreational therapy treatment through its Choice program, said Jill Gravnik, founder and executive director of Northeast Passage.

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5.5 - Independent Florida Alligator: [Pro-cannabis veterans protest opioids outside VA hospital, The group carried a casket full of pill bottles across Archer Road](#) (13 November, David Hoffman, 63k online visitors/mo; Gainesville, FL)

The veterans marched across the intersection of Southwest Archer Road and Center Drive carrying a casket draped in an American flag. At the front lawn outside the hospital, the group then folded the flag and poured hundreds of empty pill bottles inside the open casket. Joshua Littrell, a protest organizer and the founder of the nonprofit Veterans for Cannabis, said the demonstration was meant to show how deadly opioids are.

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5.6 - KBCS (FM-91.3, Audio): [Navigating the Department of Veterans Affairs as a Transgender Veteran](#) (11 November, Yuko Kodama and Ruth Bly, 1.1k online visitors/day; Bellevue, WA)

A federal judge has placed a temporary stay on President Trump's ban on transgender soldiers. Meanwhile, transgender veterans struggle to navigate for appropriate healthcare through the Department of Veterans Affairs. KBCS's Yuko Kodama spoke with transgender U.S. army veteran Brooke Wylie about her experiences in advocating for services.

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6. [Suicide Prevention](#)

6.1 - Daily Herald: [Vietnam veteran's mission: Saving my brothers from their demons](#) (12 November, Marie Wilson, 1.5M online visitors/mo; Arlington Heights, IL)

Now Atkinson feels driven -- driven to prevent veterans from ending their lives by providing connections to the Veterans Crisis Line. The line, established in 2007, receives 250,000 calls each year nationwide and helps veterans with anything causing a crisis in the immediate moment, be it thoughts of suicide, a family problem, an urgent home repair or a financial emergency.

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6.2 - Lake News: [OUR VIEW -- The hardest fought battle can be at home](#) (11 November, Editorial Board, 45k online visitors/mo; Camdenton, MO)

Suicide rates among U.S. veterans are staggering. The U.S. Department of Veterans Affairs reported that in 2016 approximately 20 suicides among veterans were recorded each day. Some advocacy groups now place that number at 22 each day. A comprehensive study released in 2017 reported that the suicide rate among middle-age and older adult veterans remains high. In 2014, approximately 65 percent of all veterans who died by suicide were age 50 or older.

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7. Women Veterans / Homelessness / Benefits / Cemeteries

7.1 - FOX News (AP): [Rhode Island opens state-of-the-art home for veterans](#) (11

November, 32.5M online visitors/mo; New York, NY)

Rhode Island has unveiled a new, state-of-the-art home for veterans on Veterans Day. Democratic Gov. Gina Raimondo hosted the state's Veterans Day ceremony and a traditional ribbon cutting Saturday at the home in Bristol, Rhode Island. Veterans began moving in last week, prior to the ceremony, and completed the move earlier this week.

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7.2 - WWL (CBS-4, Video): [Community feeds homeless veterans on Veterans Day](#) (11

November, Katie Steiner, 863k online visitors/mo; New Orleans, LA)

For many Americans, Saturday was a day to honor our veterans, those on active duty and who have served in the past. A group of community members gathered together to make sure that one group of veterans was taken care of. Veterans Day at the Veterans Affairs Medical Center means a lot of classic Louisiana food. Delicious food going into the stomachs of U.S. Military veterans.

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7.3 - Observer-Dispatch: [Homeless veterans declining or growing?](#) (12 November, Amy

Neff Roth, 305k online visitors/mo; Utica, NY)

On Friday, the day before Veterans Day, a homeless veteran showed up at the Central New York Veterans Outreach Center in Utica. The man had been to the Rescue Mission of Utica, but its shelter was full, he told workers at the outreach center. So the center's case managers went to work, arranging a bed for the weekend and searching for a longer-term solution.

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7.4 - Times Telegram: [New bill would expand veterans' burial benefits](#) (12 November, Greg

Mason, 44k online visitors/mo; Herkimer, NY)

The bill would expand VA burial benefits. For those who are cremated and laid to rest in a nontraditional resting place, the bill would require the VA to offer either a commemorative urn or a plaque to families, according to Tenney's office.

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8. Other

8.1 - The Washington Post: [Veteran who lost both legs completes 31 marathons in 31 days, runners trailing his every step](#) (12 November, Kelyn Soong, 43.9M online visitors/mo;

Washington, DC)

Marine Corps veteran Rob Jones wanted to change the narrative of the broken-down, wounded veteran struggling to transition to civilian life. So for the past 31 days, he kept running. He ran to prove a point and to inspire. Jones, who had both legs amputated after being wounded by a

land mine while serving in Afghanistan, ran the distance of 31 marathons over 31 days in 31 different cities.

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8.2 - Bustle: [6 Things Trump Promised Veterans He'd Change — But Hasn't](#) (12 November, Morgan Brinlee, 16.3M online visitors/mo; New York, NY)

Days before Veterans Day on Nov. 11, the White House released a statement in which President Donald Trump claimed "tremendous progress has been made in a short period of time" regarding his administration's efforts to reform the Department of Veteran Affairs and better support veterans. But some have argued the president's claims about progress are a bit overblown, given the promises Trump has made to veterans that have yet to be fulfilled.

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1. [Top Stories](#)

1.1 - Cincinnati Enquirer (Video): [What is post-traumatic stress disorder? How can I help someone who has it?](#) (12 November, Keith BeiryGolick, 3.9M online visitors/mo; Cincinnati, OH)

PTSD is a mental health disorder that occurs in some people who go through traumatic events and are not able to process them afterward.

About 8 million adults suffer from PTSD during a given year, according to the U.S. Department of Veterans Affairs. This is only a small portion of those who have gone through a trauma.

Dr. Kathleen Chard is a nationally recognized expert on the mental disorder. She directs the VA's Trauma Recovery Center.

She spoke with The Enquirer to answer some frequently-asked questions and dispel some myths about the mental health disorder.

Did you know?

- You don't have to talk about the trauma to get better. There are treatment programs out there, including right here in Cincinnati, where you never have to talk about the traumatic event.
- There also are programs that allow significant others to attend with you.
- The effects of PTSD can be delayed.
- Most people see improvement in five to 15 sessions of weekly therapy.

What are the symptoms?

- An estimated 7.8 percent of Americans will experience PTSD at some point in their lives, with women being twice as likely as men to develop PTSD. Here is an explanation of the definition and the symptoms of PTSD. USA TODAY
- Nightmares and daymares. Re-experiencing the trauma as if it was unfolding in front of you.
- A heightened sense of arousal. You may feel danger even when none is present. It can be triggered by a sight, smell or sound.
- Change in thoughts and feeling. Emotions become restricted, and everything can become black and white. No one can be trusted and it becomes difficult to make new friends or even to trust yourself.
- You stay away from anything that reminds you of the trauma.

What do I do if someone I know has PTSD, but doesn't want help?

- 1-800-273-8255. That's the number for the national Veterans Crisis Line. It's open to civilians, veterans and family members. The number to text is 838-255.
- Don't judge what they did, or how they responded. Positive social support is one of the biggest things friends and family can do.

- Learn about PTSD so you can help.
- Make it OK to get care.
- The National Center for PTSD has videos of actual patients talking about going through treatment. The VA also has apps for your phone that can be helpful.

[Hyperlink to Above](#)

1.2 - Springfield News-Leader (Video): [VA doctor: I want you to see the health care system I do](#) (12 November, Megha Garg, 859k online visitors/mo; Springfield, MO)

When I share with someone that I work at the Veterans Health Administration, I often get one of two responses: "Oh, I've heard the care isn't that good there." Or, "What's the latest on the scandal going on at the VA?"

Perhaps this is the inevitable conclusion for someone only reading news headlines about the Department of Veterans Affairs, but I am honored to be a VA doctor. The other day, I was in a Lyft car (I am writing from San Francisco, after all.) chatting with the driver when I mentioned I work at the VA. He immediately opened up and shared that he was an Iraq War veteran and told me all about his primary care doctor at the VA and the support he received as he transitioned back to civilian life. He thanked me for my service to the veterans. I thanked him for his service to our country. This is the VA that I know, the VA that our country should be proud of.

There are many reasons to take pride in the VA:

- It has been a leader in research and discovery for decades — for example, cardiac pacemakers and CT scan technology were pioneered at the VA.
- VA hospitals are an integral component of teaching at prestigious academic medical centers. More than 40,000 medical residents and 20,000 medical students, myself included, receive training at a VA hospital each year.
- My VA hospital has a strong affiliation with the University of California-San Francisco, one of the top medical schools in the country. It should be no surprise then, that the VA's clinical care is on par with or better than our counterparts. A recent large meta analysis done by the RAND Corporation showed that the VA often performs better than or similarly to other systems of care with regards to safety and effectiveness of care.

As a VA doctor, I work in the largest integrated health system in the nation. I take care of patients in a system that allows me to access a patient's electronic medical record across specialties and VA clinical sites nationwide. At the VA, I can access a patient's previous doctors' visits with just a few clicks, and directly instant message or email his VA providers with questions because we are all on the same computer network.

In a non-integrated system, this process entails wasted time on hold with various offices, unread faxes or, worse, no attempt to obtain old information at all.

One final point about quality of care: One of the most frustrating aspects of being a doctor is not being able to solve the social problems of my patients. The VA gives me more options to tackle this than other systems. The VA can provide special resources to our population, which I learn

about all the time from our social workers and nurse care coordinators. Just the other day, I was able to discharge a patient to the Metropolitan Fresh Start House, which provides homeless veterans with substance addiction the housing, food and structured recovery program they need.

Nevertheless, there have been real access issues at the VA, highlighted by the Arizona appointment scandal in 2014. In response, Congress passed Veterans CHOICE, a program that allows veterans who live more than 40 miles from a VA, or who are unable to get an appointment within 30 days, to obtain care with a non-VA provider.

Additionally, the VA has increased transparency of wait times for appointments — something that many other public and private hospitals have yet to do. There is promise in this new system, but CHOICE won't solve all access issues. Our patients face a shortage of all doctors, not just VA doctors, especially in rural communities.

My job reminds me every day of the sacrifices made by the men and women who have served us in the military. There is a sense of gratitude and mission unique to this special population. We all feel it, from the patients to their families to the doctors and staff.

It is my hope that as CHOICE evolves and people learn more about the VA system, the headlines will also start to reflect the VA that I know.

Megha Garg is an internal medicine physician at the San Francisco VA Medical Center and an assistant professor at the University of California, San Francisco School of Medicine.

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1.3 - WGN (CMN-720, Audio): [Dr. David Shulkin, U.S. Secretary of Veterans Affairs: Increasing Service and Accountability, Bringing the Number of Veteran Suicides to Zero](#)
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[2. Greater Choice for Veterans](#)

2.1 - Gainesville Sun: [Malcom Randall VA Medical Center drops in rating, lab on probation](#) (12 November, Paige Fry, 440k online visitors/mo; Gainesville, FL)

Infections, mortality and staffing cited as administrators work to correct problems.

The Malcom Randall VA Medical Center dropped lower in national ratings — from a three to a two on a five-point scale — partly due to patients dying there from pneumonia and sepsis.

The Gainesville hospital has about 370 vacancies, ranging from housekeepers to physicians and nurses, which union president Muriel Newman said has been causing severe problems.

Its laboratory, producing test results crucial to diagnoses, was put on probation due to staffing concerns and lack of technical oversight.

When U.S. Navy veteran Russell Gault stayed in the hospital during one of his bipolar mood episodes in 2016, he said the shower leaked onto the floor, seeping into his room, forcing him to dry the floor on his hands and knees.

He was denied a washcloth for days because nurses said the hospital didn't have any. Gault said he observed employees not working throughout the day. But while he slept, a nurse yelled into his room to wake him up.

"I was mad as hell at these people," Gault said. "Even civilians aren't treated this way."
Good and the bad
The good:

Overall job satisfaction — Employees rated the hospital at 69 on a 100-point scale, which matches the benchmark and is at the 90th percentile mark among all VA hospitals.

Satisfaction with the VA — Employees rated the hospital at 3.9 on a 5-point scale, on par with the benchmark and above the 50th percentile among all VA hospitals.

A good place to work — Employees rated the hospital at 3.8 on a 5-point scale, on par with the benchmark and at the 90th percentil among all VA hospitals.

Problem areas:

In-hospital mortality — Higher than expected rate of patients who die in acute care wards.

30-day mortality — Higher than expected rate of patients who die within 30 days of being admitted to acute care wards, particularly from heart attacks, congestive heart failure and pneumonia.

Patient safety — the potential for in-hospital complications and adverse events following surgeries and procedures.

Readmission for AMI — The rate of patients admitted with an acute myocardial infarction (heart attack) who return to the hospital within 30 days.

Rating of primary care providers — Patients rated their primary care providers — doctors, physicians' assistants and nurse practitioners — at 66 on a 100-point scale. The benchmark is 76.

The VA rates about 140 of its hospitals using its Strategic Analytics for Improvement and Learning scale, which measures hospitals from one star, at the worst, to five stars, at the best. Malcom Randall dropped from a three to a two in the most recent evaluation, released last month, making it one of worst in Florida and in the bottom third nationwide.

The rating comes from a list of measurements such as mortality ratio, in-hospital complications, length of stay and call-center speed.

Thomas Wisnieski, who oversees Malcom Randall as director of veterans health systems in North Florida and South Georgia, said the hospital here is an outlier for in-hospital pneumonia and sepsis, a life-threatening illness caused by the body's response to an infection.

Dr. Bradley Bender, chief of staff, said for pneumonia, the hospital found that patients too often were lying on their backs when vomiting. So now, they've been more diligent at making sure the patients sit up. That and other small changes have reduced the rate of in-hospital pneumonia by 50 percent.

Bender said employees had problems operating the hospital's electronic medical record, which tracks what has been done for a patient or what a doctor orders. So they've implemented a new system that's more user-friendly so nurses, doctors and pharmacists aren't confused about what a patient needs.

"There's never any magic solution for anything," he said.

Hospital spokesman Daniel Henry said a project is also underway to standardize diagnosis and treatment for sepsis.

Muriel Newman, the union president who used to work in the hospital's lab, said in-hospital sepsis is caused by people not washing their hands or unclean rooms and tools.

"How clean is that place if we're passing patients sepsis?" she said. "It's frightening."

Wisnieski also said the hospital had issues with mental-health counseling, length of stay and call-center response time, which the hospital was scored as more than a minute over the VA's benchmark.

The hospital hired someone to investigate the statistics to figure out improvements, Wisnieski said.

"These are rolling numbers," Bender said. "If we do a change, sometimes it takes a year before we actually get improvements."

In a hospital of about 3,000 employees, 370 vacant positions make a difference.

Newman, the union president, has worked in the hospital since 2002. She said the level of care has dropped since director Wisnieski took over, mostly because medical teams are incomplete and employees are overworked.

"They're not even posting all the vacancies," she said, noting the USA Jobs website lists fewer than 25 positions available at the VA in Gainesville.

The Sun tried to reach out to some employees about this, but Newman said employees can face discipline for speaking to the media.

Wisnieski said the vacancies include doctors, nurses, housekeeping, psychologists, nutrition and food service employees, to name a few.

"In health care, you could always use more," he said.

He said they have a turnover rate of 6.96 percent, due to employees retiring or leaving, which is lower than the VA's average of 7.64 percent.

Hospital spokesman Daniel Henry said the hospital added 28 physicians and had a net increase of 93 positions in fiscal year 2017.

Some of the difficulty with hiring qualified people is due to the competition in the area, Wisnieski said. They have contracted out some of the work and use overtime.

However, Newman said more people are leaving than being hired. And employees are burning out as they work overtime and face disciplinary action for conditions caused by lack of help. "We're trying to cut corners," she said. "Employees here have just been battered along due to staffing issues."

The College of American Pathologists accredits more than 8,000 laboratories. Only 18 have been put on probation this year. Malcom Randall is one of them.

On July 26, the group stated the VA's lab was on probation due to "concern with regard to the staffing in the laboratory" and "lack of technical oversight in the laboratory," according to the letter obtained by The Sun.

Paul Bachner, chair of the CAP Accreditation Committee, couldn't comment specifically on the hospital but said "being put on probation is a significant event for a laboratory" and happens rarely.

The group will do a random evaluation by the end of this year and if the lab doesn't pass, it will lose its accreditation.

Wisnieski said the lab didn't have any issue with the quality of care, but the problems fell on lab administration and policies being out of date. Due to employee privacy reasons, he couldn't comment on which individuals were causing a problem but said changes were made.

Newman, who used to work in the hospital's lab, said about 80 percent of diagnostics come from the lab, so if it's shut down, the hospital will have to quickly find new accreditation or appeal the decision. Otherwise, it will have to use another lab.

"Those of us who have been here are just stunned at what's happening," Newman said.

When U.S. Navy veteran Russell Gault checked into Malcom Randall's mental health care unit in May 2016, he didn't expect it to make his bipolar symptoms worse.

The 59-year-old voluntarily checked himself in when he felt his mental illness kick up and went in for help. He said for the 12 days he was in the hospital, from May 5-17, 2016, the nurses

were unable to provide him with a washcloth, his shower spilled water onto the floor and employees gave incompetent help.

"They treat people like animals," he said. "It's an absolute joke."

He stayed in the hospital's Bed Tower, a building about 3 years old, in room 517. He wrote a letter about his stay and handed it out to people in the hospital after trying to reach out to hospital administration and receiving no response.

In the letter, he mentioned staff members who didn't work and one who yelled into his room at 1 a.m., waking him up.

Bender, the hospital chief of staff, said there was an issue with the veteran receiving a washcloth, but the data doesn't "reflect it was 12 days he didn't have a washcloth." He acknowledged the showers didn't drain properly but said they have been fixed. He said hospital officials tried to reach Gault, but couldn't locate him.

A U.S. Coast Guard veteran who stayed at the hospital the same time as Gault also said he didn't receive any washcloths during his three weeks of care. He declined to give his name due to privacy concerns.

"I wish the VA could do a little better," he said.

Wisnieski said he was aware of the complaints made about the employees and said actions have been taken, but declined to go into specifics due to employee privacy laws.

Gault, however, said he was so tired of the VA's care that he moved to Long Beach, California, as soon as he could. The difference in the California VA's care is "night and day."

Bender said he encourages patient complaints.

"We want to know," he said. "We want to be able to fix things."

Cory Wipke, a 45-year-old U.S. Army veteran, said he's visited the VA hospital for several issues including his insomnia, shingles and vertigo.

Every time he visits he said the wait time is at least two hours, sometimes stretching to seven hours.

"I hate it," he said. "Nobody likes going there."

Despite complaints, Wisnieski said the hospital is trying to be transparent and make those corrections to serve the people who served this country.

"It's our right and privilege to provide them with exceptional health care," he said. "That's what we strive to do."

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2.2 - Times-News: [Reader Comment: Honoring veterans by effectively supporting their service](#) (12 November, Sen. Mike Crapo (R-Idaho), 201k online visitors/mo; Twin Falls, ID)

Veterans Day — a day to honor veterans for their service to our nation — is a good time to take stock of where we are in ensuring that they have access to quality health care and other services that support their enduring commitment. So far this year, Congress has passed and President Trump has signed into law the following important veterans-related legislation that I supported:

The Veterans Appeals Improvement and Modernization Act of 2017 overhauls the current U.S. Department of Veterans Affairs appeals process and replaces it with a new multi-track system to ensure veterans and their families receive timelier decisions on essential benefits provided by the VA. I co-sponsored this legislation, as Idaho veterans have shared detailed personal accounts of how the VA claims appeals process could better serve veterans.

The VA Choice and Quality Employment Act of 2017 provides resources to keep the Veterans Choice Program running; authorizes various veterans home leases; and makes improvements to certain hiring and personnel-management practices at the VA. Earlier this year, similar legislation was enacted that extends the sunset date for the Choice program through January 2018; makes the VA the primary payer for all care through the Choice program; and contains provisions to improve records-keeping for veterans who use the Choice program. Neither of these laws fix all the problems with the Choice program; Idaho veterans and their family members have made clear that it does not work for Idahoans. Rather, this extension helps ensure that veterans dependent on the Choice program are not left in the lurch while work continues to address the problems — including cumbersome eligibility requirements and payment delays.

The Harry W. Colmery Veterans Education Assistance Act enacts a variety of improvements to eligibility for and utilization of veterans' educational assistance (GI Bill) benefits. The law includes legislation — known as the Shauna Hill Post-9/11 Education Benefits Transferability Act — introduced in the U.S. House of Representatives by Rep. Raúl Labrador, R-Idaho. I joined Sen. Jim Risch, R-Idaho, in introducing the companion legislation in the Senate. This provision, named for Idahoan Shauna Hill who was killed in an automobile accident, enables veterans to reassign educational benefits in the event the original recipient dies.

This is not a comprehensive list, but rather highlights of what Congress has been able to accomplish for veterans so far this year. I also continue to work with veterans and the VA directly to address individual issues through casework — which has resulted in the return of \$2.1 million in claims and medical benefits to Idaho veterans from the VA so far this year. If you find yourself in need of assistance with a specific agency, please contact staff in one of my regional offices to discuss your situation. Contact information, the required privacy release form and frequently asked questions can be accessed through my official website at www.crapo.senate.gov.

Despite progress, we definitely have more to do to ensure that federal policy is increasingly responsive to Idaho veterans and their needs. I introduced SB1279 — the Veterans Health Administration Reform Act of 2017 — to address concerns raised by Idaho veterans with the Veterans Choice Program. These efforts will improve this program and make it easier for Idaho veterans to access care. I look forward to working to enact this and other pending legislation to improve veterans programs.

The input of Idaho veterans and learning from their experiences have guided my support for veterans-related legislation and policy changes. Please keep sharing your insights as work continues to ensure our nation effectively supports the service of our nation's veterans every Veterans Day.

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2.3 - Mankato Free Press: [In Crossfire Rural vets in midst of health care debate, Lawmakers try to fix Choice Program](#) (12 November, May Rao, 192k online visitors/mo; Mankato, MN)

When Phil Klenk injured himself with a shovel during yard work, his wife, Lisa, drove him more than an hour from their home in Winthrop to the VA hospital in Minneapolis for urgent care.

It wasn't supposed to work that way. Both veterans, the Klenks had high hopes for a federal program that promised an easier way for rural service members to receive medical treatment close to home.

But Lisa Klenk, the veterans service officer for Sibley County, quickly found the Veterans Choice Program to be so bureaucratic and slow-moving — it took her 21/2 months to get a physical therapy appointment near home — that she's reverted to visiting VA hospitals in Minneapolis and St. Cloud, 75 miles away.

"Even though it's an hour and 10 minute drive, it's quicker for me to go there than to go to my local choice program," Lisa Klenk said.

Three years after the Veterans Choice Program began, federal lawmakers are racing to overhaul the troubled multibillion-dollar effort before it runs out of money. That could happen as early as December, following the approval of \$2.1 billion in emergency funding in August.

Stakes are high for elected officials, including President Trump, who repeatedly promised as a candidate that veterans would get better treatment than under the previous administration. In an Op-Ed in The Hill to honor Veterans Day, Secretary of Veterans Affairs David Shulkin noted he was working with Congress on a replacement called the CARE Act as part of a series of reforms at the agency.

At least a third of the people enrolled in the VA health care system live in rural areas and are more likely to be older and face medical problems that require costlier care.

"It's pretty hard to find a veteran who's happy with the way the Choice Program is working," said U.S. Rep. Rick Nolan, D-Minn., whose sprawling, largely rural northeastern Minnesota district faces the very challenges that the program was supposed to address. "Just colossal administrative snafus and delays and problems have been associated with (it)."

Nolan said he has a neighbor who tried for two years to get an appointment to be treated for a neck injury that the VA system couldn't handle in-house. The congressman recently attended a gathering of about 100 veterans in International Falls to talk about a solution.

"Every time I've had to deal with Veterans Choice there's been a problem," disabled veteran Joe Buzay told the group. "I've spent hours on the phone talking to them, trying to get things straightened out."

Buzay drew applause when he added: "Honestly, I'm glad to see it's going away."

Lawmakers approved the program in 2014, following a scandal over long wait times at the Phoenix VA. The program permits veterans who have to wait more than 30 days for treatment at a VA hospital or live more than 40 miles away to get care from private providers close by.

Members of Congress and Shulkin have been circulating replacement proposals. Shulkin is pushing a plan to allow veterans to seek private-sector care reimbursed by the VA if the government's facilities don't provide what they need, can't provide it in a timely way or don't meet quality metrics compared with community health providers. His proposal would go further than a congressional proposal that would have primary care VA doctors refer patients to a network of private providers when needed.

Shulkin told lawmakers at a hearing last month that streamlining the choice program with other community care programs would save billions over a decade, noting that 13 percent of the choice program's funding went toward "extremely high" administrative costs.

"I'm concerned with how it will be funded," said U.S. Rep. Tim Walz of Mankato, the senior Democrat on the House Committee on Veterans Affairs, during that hearing. "I continue to believe that veterans do not benefit when we scrape the barrel for money by skimming from some veteran benefits programs to pay for others."

The House proposal would be funded with discretionary funds subject to approval annually, according to Walz's office.

In the 1st District that Walz represents, Mayo Clinic is watching the debate closely; its leaders repeatedly have met with Shulkin in Washington to discuss veteran health care.

Minnesota's most prominent medical system drew some backlash for not participating in the Veterans Choice program, citing high administrative costs to comply. Providers "have to go through a number of hoops" to see veterans for an appointment and pass through many layers of bureaucracy to set up related tests, said Kathleen Harrington, who heads Mayo's division of policy and government relations. Mayo and other health care providers say the process involves excessive paperwork and extra staffing.

"It's just not very modern," Harrington said. "We're living in an age where time is very, very critical and the burdens slow things down, add additional costs and excessive time, defeating the purpose of getting veterans the care they need in a timely basis."

Mayo has yet to back a replacement program. Harrington said what they've seen so far lacks sufficient details.

At Rainy Lake Medical Center in International Falls, employees routinely discover errors in the authorizations provided by the Veterans Choice program administrator, according to Kris Foss, executive director of clinic operations. The staff finds dates aren't entered correctly, for example, or that veterans aren't aware that the program had approved their appointments until Rainy

Lake calls them. The medical center sometimes has to dial the program at 8 a.m. and wait on hold for five hours to clear up problems.

"With us being so remote, sometimes traveling to an appointment isn't an option," Foss said. "Having care close to them isn't a convenience — for some of these veterans who have served our country ... it's a necessity."

St. Cloud-based CentraCare Health has had to wait as long as a year for VA reimbursements, according to system director Kathy Parsons, and has to fax or email medical records up to five times to program administrators. She praised the House proposal for mandating that more records be sent electronically and reimbursement go to private providers more quickly.

In her job as Sibley County veteran service officer, Klenk knows plenty of veterans face long waits at private providers nearby — undercutting the chief aim of a program meant to bring care to people who live more than 40 miles from a VA facility. She's dealt with veterans contacted by collection agencies because of VA delays in reimbursing private providers.

The paperwork and bureaucracy are so extensive, Klenk said, "that we're requiring (of) a veteran who served our country ... more than we are requiring of a Medicare patient, which is crazy. It boggles my mind."

Last month Shulkin told lawmakers that the VA would "take back customer service."

But he called on them to act soon, saying, "We need Congress to pass this legislation to avoid the program running out of money and to give veterans a system that works."

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2.4 - Panama City News Herald: [OUR VIEW: Veterans need to be helped](#) (12 November, Editorial Board, 189k online visitors/mo; Panama City, FL)

Trump has done more than mouth off, working with Congress to better serve roughly 18.5 million American veterans.

This past weekend, Americans celebrated Veterans Day, honoring the brave men and women in uniform who have served their country — in many cases, risking their lives on the battlefield — to defend our nation and its freedoms.

President Donald Trump is in Vietnam at the Asia-Pacific Economic Cooperation forum. Before embarking on his lengthy Asian trip, he declared November National Veterans and Military Families Month.

During his campaign for the presidency, Mr. Trump blasted the Department of Veterans Affairs for long delays in medical care encountered by veterans, branding it the "most corrupt" and "most incompetently run agency in the United States." No president can solve all of the problems in an agency with limited resources and extraordinary challenges. But Trump has done more than mouth off in this case, working with Congress to better serve roughly 18.5 million American veterans.

David Shulkin, the secretary of Veterans Affairs, has started the process of improving services for veterans. In a Nov. 9 press release, he noted that “no fewer than five major pieces of legislation on a range of veterans issues” have been enacted this year, focusing on “accountability, whistleblower protection, choice in health care, educational benefits and appeals modernization.”

Working with the administration, Congress passed the Veterans Appeals Improvement and Modernization Act, which provides faster claims service for veterans, and the Forever GI Bill, enhancing their educational benefits.

Congress also gave Shulkin increased powers to remove his employees in a much swifter manner if they have engaged in some form of misconduct, aided by the VA Office of Accountability and Whistleblower Protection. It is also weighing legislation that would enable Veterans Affairs to provide civil legal aid.

There are other ways veterans are being helped.

Washington’s firm commitment to maintaining low-interest rate VA loans, for example, has helped more veterans buy homes.

Rep. Al Lawson, D-Florida, wants to tackle the rarely-discussed problem of veteran hunger. He has enlisted congressional support for the extension of the Supplemental Nutrition Assistance Program benefits to veterans who need food.

The “Pups for Patriots Act” is making its way through Congress. Sponsored by Representatives Gus Bilirakis, R-Florida, and Henry Cuellar, D-Texas, this legislation would provide training and service dogs for veterans who suffered from post-traumatic stress and/or traumatic brain injury. This important gesture is widely supported by both parties.

Ford Motor Company, meanwhile, is donating eight Flex utility vehicles to the department’s Transportation Network to help disabled veterans get to medical appointments, and Accuracy Incorporated, a radiation oncology company, has enhanced its radiation therapy systems to help veterans diagnosed with cancer.

These programs and innovations will help improve the quality of life for our veterans, and give them a chance to lead lives with dignity and pride. Those who have sacrificed greatly to protect us and preserve our freedoms deserve nothing less.

This editorial first appeared in the Providence Journal, a News Herald sister paper with GateHouse Media.

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2.5 - WBIW (AM-1340): [Donnelly Announces Support for Bipartisan Legislation to Help Prevent Overmedication Of Veterans](#) (13 November, 57k online visitors/mo; Bedford, IN)

(SOUTH BEND) - U.S. Senator Joe Donnelly announced his support for bipartisan legislation that aims to help protect against the overmedication of our nation's veterans and prevent veteran suicide.

The Veterans Overmedication Prevention Act, introduced by the Chairman of the Armed Services Committee, Senator John McCain (R-AZ), would commission an independent review of the deaths of veterans who died by suicide or drug overdose over the last five years while receiving care through the Department of Veterans Affairs (VA) and an assessment of the role that prescription medications may have played.

Donnelly said, "As our nation combats two terrible crises, the opioid abuse epidemic and the unacceptably-high rate of veteran suicide, we owe it to those who have served to better understand any correlation between overmedication and suicide. This bipartisan bill would bring independent experts together so that we have the information necessary to ensure veterans receive the best possible care and help determine whether overmedication of prescription drugs, including opioids, is contributing to veteran suicide."

Donnelly has worked effectively and tirelessly over the past four-plus years to find commonsense, bipartisan solutions to combat military suicide and strengthen military mental health care, including through his Sexton Act and his Servicemember Mental Health Care Package. Donnelly has also helped pass legislation enabling veterans to access care outside the VA and has pushed for increased transparency and accountability at VA hospitals.

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2.6 - Tampa Bay Reporter: [Bilirakis Seeks To Expand Dental Care For Veterans](#) (12 November, 17k online visitors/mo; Tampa, FL)

WASHINGTON, DC – U.S. Rep. Gus Bilirakis, R-Tarpon Springs, is sponsoring a bill that's designed to expand access to dental care for veterans.

The bill, called the Veterans Early Treatment for Chronic Ailment Resurgence through Examinations Act, arose because of conversations Bilirakis had with veterans while co-hosting the Stars, Stripes and Smiles event each year, to provide dental care to 75 veterans at no cost.

"Each year when I co-host the Stars, Stripes and Smiles event, I am heartbroken to hear the stories of veterans suffering with conditions that are exacerbated by poor oral health," Bilirakis said. "Many of them are in pain and cannot afford treatment. We know that preventive care leads to better health outcomes and to long-term savings. My hope is that the VET CARE bill will serve as a catalyst for expanding dental health care services to all veterans, while saving the Veterans Administration money due to fewer complications of chronic ailments," Bilirakis said.

The VET CARE bill will authorize a pilot program to provide veterans with dental care and evaluating the cost savings of improving oral health as an integral part of total body health.

The pilot program involves 1,500 veterans between the ages of 40 and 70 years old, who have Type II Diabetes and untreated periodontal disease. The outcomes of the pilot program would be reported to Congress providing data to help make effective health policy decisions for the VA and its patients.

If the pilot program demonstrates that investing in professional oral health care makes patients healthier overall while saving taxpayers money, Bilirakis said he would pursue legislation to

responsibly deliver dental care to veterans who have earned and deserve the best health care they can receive.

Bilirakis represents Florida's 12th Congressional District, which includes north Pinellas and Pasco counties.

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3. Modernize Our System

4. Focus Resources More Efficiently

4.1 - The Register-Herald: [Raleigh County Veterans Court helps vets get their lives back on track](#) (12 November, Wendy Holdren. 77k online visitors/mo; Beckley, WV)

In an office outside Judge Andrew Dimlich's chambers on the bottom floor of the Raleigh County Judicial Annex, nine men and women in professional attire sit at a boardroom table.

At the center of the table, among their legal pads and coffee cups, is a landline telephone dialed into the Martinsburg VA Medical Center.

With the call on speakerphone, Judge Dimlich asks, "How have you been?" A veteran on the other line responds, "I've been doing great."

He shares an update about his health and some exciting news about an invitation to a speaking event.

The judge offers congratulations, and asks if there are any issues or problems he or other members at the table need to address.

The man says no, and the judge adds, "All right, well, you keep up the good work."

Another veteran, this one much more soft spoken than the last, picks up the line. He, too, shares an update with the team.

A woman at the left side of the boardroom table smiles broadly and says to the man, "You're doing everything we're asking of you. We're really proud of you."

These men, along with two others, are the first participants of the Raleigh County Veterans Court — a specialty court offering veterans who have committed a nonviolent crime in Raleigh County a chance to get their lives back on track.

To qualify for the program, their crime must in some way be attributable to their military service.

Judge Dimlich said the issue does not have to be combat-related for a veteran to be approved. For example, one veteran in the program was tasked with delivering the news to families that their loved one had died.

"You can look at a guy's service and what he's been through," said Brandon Steele, Raleigh County assistant prosecuting attorney. "We have to ask ourselves, 'Is this person ready to face the problem head on? Or are they looking for a free pass?' "

Dimlich emphasizes that Veterans Court is not a free pass: "It takes a lot more time getting through the process than just dealing with criminal charges."

Raleigh County Magistrate Steve Massie said the U.S. wouldn't be the country it is today without the service of veterans.

"If we can attribute their problems to what they did for us, we owe them the opportunity for this."

Getting started

When someone is arrested, one of the first questions a defense attorney will ask is, "Are you a veteran?"

If the answer is yes, and the individual was honorably discharged, that person may be a candidate for Veterans Court.

Their service will be confirmed by the VA, and the Veterans Court team will assemble, every other Thursday at 3 p.m., to review the standing of current participants and consider new applicants.

Applicants are asked, "How did you get from honorably discharged to here? Tell us what's going on in your life."

If veterans are accepted into the program, their criminal charges are placed on hold while the court helps them address underlying issues — everything from housing and employment to substance abuse and PTSD treatment.

Steele said the program varies in duration based on the needs of the individual. If veterans successfully complete the program, charges can be completely dismissed or dropped to a misdemeanor, at the discretion of the prosecutor. If they do not complete the program, they go back to square one, with charges still pending.

"I've found these veterans are not just receptive to the program because of the reduced charges," Steele said. "They don't want to be the person they've become and they're asking for help."

He said the program's administrators want to help the veterans meet their personal, career and family goals.

The first Veterans Court in the U.S. was established in 2008 in Buffalo, N.Y. Since then, programs have followed suit across the country.

Aside from Raleigh County, three other programs are available in West Virginia — in Putnam, Wayne and Kanawha counties. Mercer County is in the early stages of creating a program.

Most of the Raleigh County cases have involved drug use, Steele said, which requires long-term rehabilitation.

Although the Beckley VA Medical Center does not offer long-term rehabilitation for substance use, facilities in Martinsburg and Salem, Va., do.

Steele said some veterans simply do not know what services are available to them through the VA. But Veterans Court works with participants to match them with the appropriate tools and resources.

Coordinating benefits

Jackie Hartsog, Veterans Justice Outreach coordinator, is the Veterans Court go-to for all things benefits-related.

First, she helps determine whether applicants qualify for VA health care benefits. If they do, she shares with them what services are available and makes recommendations based on her initial assessment.

The VA has a tremendous number of services, she said, including residential and out-patient mental health services. Some diagnoses treated include PTSD, traumatic brain injuries and substance use disorder.

Oftentimes, mental health issues will manifest themselves through the commission of crimes or illegal activities, Hartsog said.

She also said mental health is sometimes associated with homelessness. She and a team at the VA help connect veterans who qualify with the U.S. Department of Housing and Urban Development's VA Supportive Housing voucher program.

If approved, the veterans not only get a housing voucher, but also a case manager who works with them in all aspects of their care.

"They make sure they're making all their appointments, getting their medications and the utilities are staying on."

Hartsog said once mental health and housing are addressed, employment is needed to help veterans support themselves.

The VA offers employment specialists to help veterans locate jobs. Supported employment and compensated work therapy programs are also available.

Through supported employment, an advocate for the veteran goes to his or her job site and works with the employer to discuss the veteran's limitations, and to ensure the work schedule isn't overwhelming.

Through the transitional work therapy program, veterans are hired for jobs within the VA with the goal of moving into stable employment. This program is especially conducive for the scheduling of other needed appointments at the facility.